Clerk of the House of Representatives Legislative Resource Center B-106 Cannon Building Washington, DC 20515 Secretary of the Senate Office of Public Records 232 Hart Building Washington, DC 20510

SECRETARY OF TH

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LOBBYING REGISTRATION

Check One: 🗸 1	New Registrant 🗌 New Client fo	or Existing Registrant	Amendmen		fective F	ate of Registra	tion 03/
2. House Ident	tification		Sena	ite Ident	ification		
REGISTR.	ANT 🗸 Organization [Individual				·	
3. Registrant	Organization Global Poli	icy Group, LLC					
Address 1101	Pennsylvania Avenue, NW	•	Address2	7th Flo	oor		
City Was	hington		State	DC	Zip	20004 -	Cou
4. Principal pla	ce of business (if different tha	an line 3)	_				
City	,		State		Zip	-	Cou
	e and telephone number		International	Number			
Contact Ms.	Katherine E. Friess	Telenhone	(202) 756-2254		E-mail k	atherine@globalp	olicyltd.com
		<u></u> -	<u> </u>				
	cription of registrant's busines						
Government Re	elations and Business Develor	pment				····	
CLIENT 7. Client name	labeled "Self" and proceed to Bascom Global Internet Se		elf 				
Address							
Variance 22	275 Marcus Blvd, Suite R						-
	275 Marcus Blvd, Suite R Hauppauge	-	State	NY	Zip	11788 -	Соц
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Registrant	Global Policy Group,			Client Name	Bascom Global Inte			
LOBBY	ING ISSUE	S						
11. Genera	l lobbying issue a	reas. Select all app	plicable codes	listed in instruc	ctions and on the	reverse sid	e of Form I	_D-1,
EDU	SCI	DEF	<u> </u>					
12. Specifi	c lobbying issues	(current and antic	ipated)					
	ı Technology Poli	cy acation Technolog	зу					
AFFILI	ATED ORG	GANIZATIO	NS		- -			
13. Is there	an entity other th	nan the client that whole or in major p	contributes m	ore than \$10,000 ervises or contro	0 to the lobbying ls the registrant's	activities of lobbying a	of the regist activities?	rant i
V	No> Go to line	: 14.			e the rest of this en proceed to line		each entity	matc
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						State —		Country
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14. Is there	b) directly or indirectly or indirectly or any of an affiliate of lobbying activity?	y 0% equitable own rectly, in whole or rganization identi f the client or any	in major part fied on line 13 organization i	, plans, supervis 3; or dentified on lin- 'es> Complet	ses, controls, dire	cts, finance rect interest section for	es or subsid	come
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				City State	Country			
Signature	✓ Digitally Sign	ned By: Katherine	E Friess		Country		Date	04/

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