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LOBBYING REPORT

Lobbying Disclosure Act of 1995 (Section 5) - All Filers Are Required to Complete This Page

1. Registrant Name Alcalde & Fay			
2. Registrant Address <input type="checkbox"/> Check if different than previously reported Address 2111 Wilson Boulevard 8th Floor City Arlington State/Zip (or Country) VA 22201 USA			
3. Principal Place of Business (if different from line 2) City _____ State/Zip (or Country) _____			
4. Contact Name Shantrel Brown	Telephone (703) 841-0626	E-mail (optional) brown@alcalde-fay.com	5. Senate ID # 818-3235
7. Client Name <input type="checkbox"/> Self Orthodontic Education Company			6. House ID # 31771215


TYPE OF REPORT 8. Year 2004 Midyear (January 1-June 30) OR Year End (July 1-Dec 31)

9. Check if this filing amends a previously filed version of this report

10. Check if this is a Termination Report >> Termination Date _____ 11. No Lobbying Activities

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms	13. Organizations
INCOME relating to lobbying activities for this reporting period was: Less than \$10,000 <input type="checkbox"/> \$10,000 or more <input checked="" type="checkbox"/> >> \$ <u>\$20,000.00</u> <small>Income (nearest \$20,000)</small>	EXPENSES relating to lobbying activities for this reporting period were: Less than \$10,000 <input type="checkbox"/> \$10,000 or more <input type="checkbox"/> >> \$ _____ <small>Expenses (nearest \$20,000)</small>
Provide a good faith estimate, rounded to the nearest \$20,000 of all lobbying related income from the client (including all payments to the registrant by any other entity for lobbying activities on behalf of the client).	14. REPORTING METHOD. Check box to indicate reporting method. See instructions for description of method. <input type="checkbox"/> Method A. Reporting amounts using LDA definition <input type="checkbox"/> Method B. Reporting amounts under section 6033 of the Internal Revenue Code <input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code

Signature  _____

Printed Name and Title Shantrel Brown, Associate P

Registrant Name: Alcalde & Fay

Client Name: Orthodontic Education Company

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the registrant engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code, provide information as requested. Attach additional page(s) as needed.

15. General issue area code EDU (one per page)

16. Specific Lobbying issues
Education

17. House(s) of Congress and Federal agencies contacted Check if None
Department of Education
Federal Trade Commission
House of Representatives
Senate

18. Name of each individual who acted as a lobbyist in this issue area

Name	Covered Official Position (if applicable)
Brown, Shantrel	
Hirshberg, Jennefer	

19. Interest of each foreign entity in the specific issues listed on line 16 above Check if None

[Handwritten Signature]

Signature

Printed Name and Title

Shantay Brown, Associate

P