

Clerk of the House of Representatives  
Legislative Resource Center  
B-106 Cannon Building  
Washington, DC 20515

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Office of Public Records  
232 Hart Building  
Washington, DC 20510

SECRETARY OF THE SENATE

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**LOBBYING REPORT**

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

1. Registrant Name <u>Bob Moss Associates</u>			
2. Address <input type="checkbox"/> Check if different than previously reported <u>1133 Connecticut Ave Fifth floor</u>			
3. Principal Place of Business (if different from line 2) City: <u>Washington</u> State/Zip (or Country) <u>DC 20036</u>			
4. Contact Name <u>Bob Moss</u>	Telephone <u>202/429-6874</u>	E-mail (optional) <u>bmoss@bmaadc.com</u>	5. Senate ID # <u>120</u>
7. Client Name <input type="checkbox"/> Self <u>Re Centech Group</u>			6. House ID # <u>3483</u>

**TYPE OF REPORT** 8. Year 2004 Midyear (January 1-June 30) ☒ OR Year End (July 1-D

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

10. Check if this is a Termination Report ☒ ⇒ Termination Date 1/1/04

11. No Lobby

**INCOME OR EXPENSES - Complete Either Line 12 OR Line 13**

**12. Lobbying Firms**

INCOME relating to lobbying activities for this reporting period was:

Less than \$10,000 ☒

\$10,000 or more ☐ ⇒ \$ \_\_\_\_\_  
Income (nearest \$20,000)

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).

**13. Organizations**

EXPENSES relating to lobbying activities for this period were:

Less than \$10,000 ☐

\$10,000 or more ☐ ⇒ \$ \_\_\_\_\_  
Expenses (nearest \$20,000)

**14. REPORTING METHOD.** Check box to indicate accounting method. See instructions for description

☐ Method A. Reporting amounts using LDA def

☐ Method B. Reporting amounts under section 162(e) Internal Revenue Code

☐ Method C. Reporting amounts under section 162(e) Internal Revenue Code

Signature Bob Moss

Printed Name and Title DOD PRISON PRINCIPAL

LD-2 (REV. 6/98)

Registrant Name Bob Moss Assoc Client Name The Center for

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

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

16. Specific lobbying issues

Government Contract issues

17. House(s) of Congress and Federal agencies contacted ☒ Check if None

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

Name	Covered Official Position (if applicable)
<u>Bob Moss</u>	

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

Signature

Bob Moss

Date

8/20/0

Printed Name and Title

Bob Moss, President

Form LD-2 (Rev.6/98)