

Clerk of the House of Representatives
Legislative Resource Center
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Washington, DC 20515

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Office of Public Records
232 Hart Building
Washington, DC 20510

SECRETARY OF
04 FEB 27 PM

LOBBYING REPORT

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

1. Registrant Name Apartment and Office Building Association of Metropolitan Washington			
2. Address <input type="checkbox"/> Check if different than previously reported 1050 17th Street, NW, Suite 300 Principal Place of Business (if different from line 2) Washington State/Zip (or Country) DC 20036			
Contact Name Jeanne Clarke	Telephone 202-296-3390	E-mail (optional) Jclarke@aoba-metro.org	5. Senate ID # 3144800
7. Client Name <input type="checkbox"/> Self N/A			6. House ID #

TYPE OF REPORT 8. Year 2003 Midyear (January 1-June 30) OR Year End (July 1-Dec

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

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 reporting period were:

Less than \$10,000 \$0.00

\$10,000 or more ⇒ \$ _____
Expenses (nearest \$

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

Method A. Reporting amounts using LDA definit

Method B. Reporting amounts under section 603
Internal Revenue Code

Method C. Reporting amounts under section 162
Internal Revenue Code

Signature

Jeanne Clarke

Printed Name and Title Jeanne Clauke - Director of Administration

ID-2 (REV. 6/98)

P.



Apartment & Office Building Association of Metropolitan Washington
Registrant Name _____ Client Name N/A

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

15. General issue area code None (one per page)

16. Specific lobbying issues



se(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)
N/A	

19. Interest of each foreign entity in the specific issues listed on line 16 above

Check if None

Signature Jeanne Clarke Date February 2008

Printed Name and Title Jeanne Clarke - Director of Administration

Form LD-2 (Rev. 6/98)

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