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

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LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4) 1/17/2003 1. Effective Date of Registration Check if this is an Amended Registration 18570-354 30784006 Senate Identification Number 2. House Identification Number REGISTRANT Daryl Owen Associates, Inc. 3. Registrant Name Suite 310 801 Pennsylvania Avenue, NW Address State DC Zip 20004 Washington City 4. Principal place of business (if different from line 3) State/Zip (or Country) City 5. Telephone number and contact name E-Mail (optional) Contact Daryl Owen 202393-7771 6. General description of registrant's business or activities Government relations firm. A lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should **CLIENT** labeled "Self" and proceed to line 10.

Self 7. Client Name **Duke Energy Suite 8025** 5400 Westheimer Blvd. Address State TX Zip 77056 Houston City 8. Principal place of business (if different from line 7) State/Zip (or Country) City 9. General description of client's business or activities Natural Gas Pipeline Company LOBBYISTS 10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any person listed in this section has served as a "covered executive branch official" or "covered legislative branch official" within two years of first acting as a lobbyist for this client, state the executive and/or legislative position(s) in which the person served. Covered Official Position (if applicable) Name Daryl Owen

Form LD-1 (Rev. 06/98)

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Registrant Nam	e: Daryl Owen As	Daryl Owen Associates, Inc. Duke Energy			
Client Name:	Duke Energy				
		ect all applicable codes listed in	instructions and on the reverse side	of Form LD-1, page 1.	
	lobbying issues (current		o the decommissioning deregulati	on of electric utilities.	
13. Is there semiann	TED ORGANIZ an entity other than the c nual period and in whole Go to line 14.	client that contributes more than	\$10,000 to the lobbying activities of controls the registrant's lobbying activities of Complete the rest of this section criteria above, then proceed to	activities? n for each entity matching the	
	Name		Address	Principal Place of Busin (city and state or countr	
14. Is there a) b)	directly or indirectly, in of the client or any organization.	whole or in major part, plans, s anization identified on line 13; o ent or any organization identified	on line 13 and has a direct interest	, or subsidizes activities in the outcome of the on for each entity matching th	
1	Name	Address	Principal Place of Business (eity and state or country)	Amount of contribution for lobbying activities	
Signature	Darla	n_	Dat	e 2/13/2003	

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Printed Name and Title

Form LD-1 (Rev. 06/98)