

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 THE SENATE

07 NOV 29 AM 8:17

**LOBBYING REGISTRATION**

Lobbying Disclosure Act of 1995 (Section 4)

Check One: ☒ New Registrant ☐ New Client for Existing Registrant ☐ Amendment

1. Effective Date of Registration 2**2. House Identification****Senate Identification****REGISTRANT** ☒ Organization ☒ Individual3. Registrant Organization William B. GolemanAddress 409 Overholt Dr.

Address2

City Sand Springs, OKState OK Zip 74063 Cc

4. Principal place of business (if different than line 3)

City State Zip Cc

5. Contact name and telephone number

☐ International NumberContact William Goleman Telephone 918 766-3790 E-mail heptson1@20

6. General description of registrant's business or activities

contracts, public interest, political activity.**CLIENT**

A Lobbying Firm is required to file a separate registration for each client. Organizations employing in-house lobbyists shall be labeled "Self" and proceed to line 10. ☒ Self

7. Client name

Address

City State Zip Cc

8. Principal place of business (if different than line 7)

City State Zip Cc

9. General description of client's business or activities

**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 in this section has served as a "covered executive branch official" or "covered legislative branch official" within two years prior to acting as a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

| Name  |      |        | Covered Official Position (if applicable) |
|-------|------|--------|-------------------------------------------|
| First | Last | Suffix |                                           |
|       |      |        |                                           |
|       |      |        |                                           |
|       |      |        |                                           |
|       |      |        |                                           |
|       |      |        |                                           |
|       |      |        |                                           |
|       |      |        |                                           |
|       |      |        |                                           |
|       |      |        |                                           |

1000101140



Registrant

Client Name

**LOBBYING ISSUES**

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1,

12. Specific lobbying issues (current and anticipated)

*legislative, economic, education, business, contacts***AFFILIATED ORGANIZATIONS**

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the registrant in a semiannual period and in whole or in major part plans supervises or controls the registrant's lobbying activities?

☒ No --> Go to line 14.☐ Yes --> Complete the rest of this section for each entity meeting the criteria above, then proceed to line 14.

| Name        | Address                         | Principal Place of Business |
|-------------|---------------------------------|-----------------------------|
| Street City | State/Province Zip Code Country | City State Country          |
| 11          |                                 |                             |
| 12          |                                 |                             |
|             |                                 |                             |
|             |                                 |                             |
|             |                                 |                             |
|             |                                 |                             |

**FOREIGN ENTITIES**

14. Is there any foreign entity

- a) holds at least 20% equitable ownership in the client or any organization identified on line 13; or  
 b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or subsidizes the client or any organization identified on line 13; or  
 c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in the outcome lobbying activity?

☒ No --> Sign and date the registration.☐ Yes --> Complete the rest of this section for each entity meeting the criteria above, then sign the registration.

| Name        | Address                | Principal place of business (city and state or country) | Amount of contribution for lobbying activities |
|-------------|------------------------|---------------------------------------------------------|------------------------------------------------|
| Street City | State/Province Country | City State Country                                      |                                                |
|             |                        |                                                         |                                                |
|             |                        |                                                         |                                                |
|             |                        |                                                         |                                                |
|             |                        |                                                         |                                                |

Signature

*William B. Goleman Sr.*

Date

11

Printed Name and Title

*William B. Goleman Sr.*

