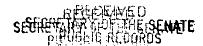
Clerk of the House of Representatives Legislative Resource Center B-106 Cannon Building Washington, DC 20515 Secretary of the Senate Office of Public Records 232 Hart Building Washington, DC 20510



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LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration	1. Effective Date of Registration 9/1/2003			
2. House Identification Number	Senate Identification Number			
REGISTRANT 3. Registrant name Clark and Associates				
Address 101 Constitution Avenue, NW, Suite 665	East			
City Washington	State DC Zip 20001			
4. Principal place of business (if different from line 3) City	State/Zip (or Country)			
5. Telephone number and contact name (202) 246-1600 Contact	Steve Clark E-mail (optional)			
6. General description of registrant's business or activitie Public Affairs Consultants	es ·			
labeled "Self" and proceed to line 10. Self 7. Client name Trammell Crow Real Estate Services, Address 1055 Thomas Jefferson Street NW, S	, Inc.			
City Washington	State DC Zip 20007			
8. Principal place of business (if different from line 7) City	State/Zip (or Country)			
9. General description of client's business or activities Real Estate				
this section has served as a "covered executive bran	to act as a lobbyist for the client identified on line 7. If any persich official" or "covered legislative branch official" within two yeard/or legislative position(s) in which the person served.			
Name	Covered Official Position (if applicable			
Steve Clark				
*********	***************************************			

Registrant Name	Clark and Associates	Client Name	Trammell Crow	Real Estate Services, Inc.	
LOBBYING I 11. General lobbying	SSUES g issue areas. Select all appl	icable codes listed in instru	ctions and on the rev	erse side of Form LD-1,	1
• •	g issues (current and anticipa	·	vernment	<u>-</u>	
Conordi Busino		Congress and loadial go			
13. Is there an entit a semiannual pe	ORGANIZATION y other than the client tha eriod and in whole or in n	contributes more than \$ cajor part plans, supervis	es or controls the r	egistrant's lobbying a	C
1 No ⇒ G	to to line 14.	•	te the rest of this se eria above, then pr	ection for each entity roceed to line 14.	Τ.
N	ame	Address		Principal Place of Busin (city and state or cour	
FOREIGN EN 14. Is there any for					
b) direct activ c) is an	at least 20% equitable ow tly or indirectly, in whole ities of the client or any or affiliate of the client or an all lobbying activity?	or in major part, plans, s ganization identified on	upervises, controls line 13; or	, directs, finances or s	u
2 No ⇒ Sign	and date the registration	☐ Yes ▮	-	of this section for eac ria above, then sign a	
Name	Addre	1	cipal place of cousiness state or country)	Amount of contribution for lobbying activities	- (1
Signature	Here Clar	<u> </u>	Date	09/23/2003	_

Printed Name and Title	Steve Clark - President	

Form LD-1 (Rev. 06/98)