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LOBBYING REPORT

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

1. Registrant Name The State Affairs Company			
2. Address <input type="checkbox"/> Check if different than previously reported 1600 Wilson Blvd., Suite 205			
3. Principal Place of Business (if different from line 2) City: Arlington State/Zip (or Country) VA			
4. Contact Name David McCloud	Telephone (703) 358-8600	E-mail (optional)	5. Senate ID # 36526-7
7. Client Name <input type="checkbox"/> Self Soboba Band of Mission Indians			6. House ID # 3456300

TYPE OF REPORT 8. Year 2002 Midyear (January 1-June 30) OR Year End (July 1-December 31)

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 Activities

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p>12. Lobbying Firms</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> ⇒ \$ <u>20,000.00</u> Income (nearest \$20,000)</p> <p>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).</p>	<p>13. Organizations</p> <p>EXPENSES relating to lobbying activities for this reporting period were:</p> <p>Less than \$10,000 <input checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate reporting method. See instructions for description of options.</p> <p><input checked="" type="checkbox"/> Method A. Reporting amounts using LDA definitions</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b) Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code</p>
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Signature _____

Printed Name and Title David McCloud, President

Registrant Name The State Affairs Company Client Name Soboba Band of Mission Indians

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

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

16. Specific lobbying issues

HR 4887 - Taxation of Gaming Revenues
Wold Amendment to the Appropriations Bill
Proposed Rules on Minimum Internal Standards and Class II Games Definitions
S210 - Native American Health Consolidation Act
S832 - Proposed Amendments to the Indian Gaming Regulatory Act

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

House of Representatives
Senate
Office of Intra-Government Affairs
National Indian Gaming Commission
Department of Interior/Bureau of Indian Affairs

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

Name	Covered Official Position (if applicable)
Bonnie Chafe	Senior Vice President

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

Signature _____ Date _____

Printed Name and Title David McCloud

Registrant Name The State Affairs Company Client Name Soboba Band of Mission Indians

Information Update Page - Complete ONLY where registration information has changed.

20. Client new address

21. Client new principal place of business (if different from line 20)

City _____ State/Zip (or Country) _____

22. New general description of client's business activities

LOBBYIST UPDATE

23. Name of each previously reported individual who is **no longer** expected to act as a lobbyist for the client

ISSUE UPDATE

24. General lobbying issues previously reported that **no longer** pertain

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal Place of Business (city and state or country)

26. Name of each previously reported organization that is **no longer** affiliated with the registrant or client

FOREIGN ENTITIES

27. Add the following foreign entities

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	Own percentage of client

28. Name of each previously reported foreign entity that **no longer** owns, or controls, or is affiliated with the registrant, client or affiliated organization

Signature _____ Date _____

Printed Name and Title David McCLOUD, President

