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# LOBBYING REPORT

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

|  |  |                           |  |
|--|--|---------------------------|--|
| 1. Registrant Name<br>Public Strategies Washington, Inc.   |  |                           |  |
| 2. Address <input type="checkbox"/> Check if different than previously reported<br>633 Pennsylvania Ave., NW 4th Floor |  |                           |  |
| 3. Principal Place of Business (if different from line 2)<br>City: Washington State/Zip (or Country) DC 20004          |  |                           |  |
| 4. Contact Name<br>Lucie Anan  |  | Telephone<br>202-783-2596 | E-mail (optional)<br>LAnan@PSW-inc.com |
| 5. Senate ID   |  |                           |  |
| 7. Client Name <input type="checkbox"/> Self<br>Honda North America, Inc.  |  |                           | 6. House ID #                          |

**TYPE OF REPORT** 8. Year 2001 Midyear (January 1-June 30)  OR Year End (July 1-D

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 Lobbyi

|   |  |
|---|--|
| <b>INCOME OR EXPENSES - Complete Either Line 12 OR Line 13</b>  |  |
| <b>12. Lobbying Firms</b><br>INCOME relating to lobbying activities for this reporting period was:<br>Less than \$10,000 <input type="checkbox"/><br>\$10,000 or more <input checked="" type="checkbox"/> ⇒ \$ <u>30,000</u><br>Income (nearest \$20,000)<br><br>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). | <b>13. Organizations</b><br>EXPENSES relating to lobbying activities for this re period were:<br>Less than \$10,000 <input type="checkbox"/><br>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____<br>Expenses (nearest \$20,000)<br><br><b>14. REPORTING METHOD.</b> Check box to indicat accounting method. See instructions for description c<br><input type="checkbox"/> Method A. Reporting amounts using LDA defin<br><input type="checkbox"/> Method B. Reporting amounts under section 60: Internal Revenue Code<br><input type="checkbox"/> Method C. Reporting amounts under section 16: Internal Revenue Code |

Signature Lucille Anan

Printed Name and Title Lucie Anan - Executive Assistant

LD-2 (REV. 6/98)

P



Registrant Name PSW, Inc.

Client Name Honda

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

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

16. Specific lobbying issues

CAFE

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

House of Representatives  
U.S. Senate

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

| Name                 | Covered Official Position (if applicable) |
|----------------------|---|
| <u>Anne Collett</u>  |   |
| <u>Joe O'Neill</u>   |   |
| <u>Paul Snyder</u>   |   |
| <u>Nancy O'Neill</u> |   |
|                      |   |
|                      |   |
|                      |   |
|                      |   |

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

Signature Lucie Anan

Date 8/22/01

Printed Name and Title Lucie Anan - Executive Assistant

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Page



Registrant Name PSW, Inc.

Client Name Honda

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

N/A

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 or 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 Bu<br>(city and state or co |
|------|---------|--|
|      |         |  |

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<br>(city and state or country) | Amount of contribution<br>for lobbying activities |
|------|---------|--|---|
|      |         |  |   |

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

Signature \_\_\_\_\_

Date \_\_\_\_\_

Printed Name and Title Lucie Aman - Executive Assistant

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