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

SECRETARY OF THE SENATE
01 FEB 14 AM 11:08

LOBBYING REPORT

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

1. Registrant Name
Alan Mauk Associates, LTD

2. Address ☐ Check if different than previously reported
2121 Jamieson Ave. Suite 1405

3. Principal Place of Business (if different from line 2)
City: Alexandria State/Zip (or Country) VA 22314

4. Contact Name: Alan Mauk Telephone: 703 567 2021 E-mail (optional): alanmauk @ AOL

5. Senate ID #: 24087 - 24

6. House ID #: 33808001

7. Client Name ☐ Self
ANN Eppard Associates, LTD

TYPE OF REPORT 8. Year 2000 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 Activity ☐

INCOME OR EXPENSES - Complete Either Line 12 **OR** Line 13

12. Lobbying Firms

INCOME relating to lobbying activities for this reporting period was:

Less than $10,000 ☐

$10,000 or more ☒ ⇨ $ 40,000
Income (nearest $20,000)

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).

13. Organizations

EXPENSES relating to lobbying activities for this reporting period were:

Less than $10,000 ☐

$10,000 or more ☐ ⇨ $ _____
Expenses (nearest $20,000)

14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options.

☐ **Method A.** Reporting amounts using LDA definitions only

☐ **Method B.** Reporting amounts under section 6033(b)(8)of the Internal Revenue Code

☐ **Method C.** Reporting amounts under section 162(e) of the Internal Revenue Code

Signature Alan R. Mauk

Printed Name and Title Alan R. MAUK, President

LD-2 (REV. 6/98) PAGE 1 of ____

Registrant Name Alan Mauk Associates Client Name Ann Eppard Associates, LTD

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 TRA (one per page)

16. Specific lobbying issues

Transportation Legislation. (monitored)

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

House & Senate.

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

Name	Covered Official Position (if applicable)	New
Alan B. Mauk	President	☐
		☐
		☐
		☐
		☐
		☐
		☐
		☐

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

Signature Alan B. Mauk Date Feb 12, 2001

Printed Name and Title Alan B. Mauk

Form LD-2 (Rev. 6/98) Page ____ of ____

Registrant Name Alan Mark Associates, Client Name Ann Eppers Associates, LTD

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 AVI (one per page)

16. Specific lobbying issues

Advocated higher Level of Appropriation

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

House & Senate.

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

Name	Covered Official Position (if applicable)	New
Alan Mark	President	☐
		☐
		☐
		☐
		☐
		☐
		☐
		☐

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

Signature Alan R Mark Date Feb. 12, 2001

Printed Name and Title Alan B. Mark, President

Form LD-2 (Rev 6/95) Page ____ of ____