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 RECEIVED.

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**LOBBYING REPORT** 

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

<u> </u>			
1. Registrant Name			
LEMUNYON GROUP, LLC			
2. Address Check if different than previou	usly reported		
233 PENNSYLVANIA AVENUE, S	E, SUITE 300		
3. Principal Place of Business (if different from lit	ne 2)		
City: WASHINGTON	State/Zip	o (or Country) D.C.	
4. Contact Name	Telephone	E-mail (optional)	5. Senate ID#
GLENN B. LEMUNYON	(202) 547-9050	glenn@lemunyongroup.com	53312-
7. Client Name Self			6. House ID#
LOCKHEED MARTIN			349640
INCOME OR EXPENSES	- Complete Either	Line 12 OR Line 13	
12. Lobbying Firs	ns	13. Organizat	tions
INCOME relating to lobbying activitie period was:	s for this reporting	<b>EXPENSES</b> relating to lobbying activ period were:	ities for this repor
Less than \$10,000 \		Less than \$10,000 🔲	
	A A A A A	\$10,000 or more □ ⇒ \$	
\$10,000 or more	me (nearest \$20,000)	•	nses (nearest \$20,000
Provide a good faith estimate, rounded to	,	14. REPORTING METHOD. Check box to indicate e accounting method. See instructions for description of o	
of all lobbying related income from the client (including all payments to the registrant by any other entity for lobbying		Method A. Reporting amounts using LDA definitio	
activities on behalf of the client).	or carry to topoying	Method B. Reporting amounts under section 6033( Internal Revenue Code	
	<b>1</b> \( \)	Method C. Reporting amounts un Internal Revenue Cod	
A)R-	JU		

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LD-2 (REV. 6/98)

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Registrant Name	LEMUNYON GROUP, LLC	Client Name	LOCKHEED MARTIN	pri etc.
engaged in lobbyin information as requ	IVITY. Select as many codes g on behalf of the client durin tested. Attach additional page area code DEF (one	g the reporting pe e(s) as needed.	eflect the general issue areas in which riod. Using a separate page for each	in the regi
		per page)		
DEFENSE APP	ing issues ROPRIATIONS, AUTHORIZATIO	N		
17. House(s) of C	ongress and Federal agencies	contacted	Check if None	
18. Name of each	individual who acted as a lob	byist in this issue	area <sub>.</sub>	
	Name		Covered Official Position (if applicable	:)
GLENN B. LEMUN	n foreign entity in the specific iss	ues listed on line 16	sabove	
Signature	Filing #c93e5a6e-3951-4e15-	-86df-772c44f3691d	Date 7 25 03	<del></del>

Form LD-2 (Rev.6/98)

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