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LOBBYING REPORT

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

1. Registrant Name BARTON COMPANY			
2. Address <input type="checkbox"/> Check if different than previously reported 12419 Alamarke way Upper Marlboro, MD 20772			
3. Principal Place of Business (if different from line 2) City: _____ State/Zip (or Country) _____			
4. Contact Name Stacy Barton	Telephone	E-mail (optional)	5. Senate ID # 50808
7. Client Name <input type="checkbox"/> Self Gary Sanitary District			6. House ID # 34721
TYPE OF REPORT 8. Year 2002 Midyear (January 1-June 30) <input type="checkbox"/> OR Year End (July 1-Dec)			
9. Check if this filing amends a previously filed version of this report <input checked="" type="checkbox"/>			
10. Check if this is a Termination Report <input checked="" type="checkbox"/> Termination Date 12/31/2002 11. No Lobbyin			

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 checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ 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 type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description of</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 60 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 16 Internal Revenue Code</p>
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Signature _____

Stacy Barton

Printed Name and Title Stacy Barton

LD-2 (REV. 6/98)

Registrant Name The Barten Company Client Name Gary Sanitary District

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

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

16. Specific lobbying issues

VA/HUD/EPA Appropriations
Energy & Water Appropriations

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)
<u>Stacy Barten</u>	<u>N/A</u>

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

Signature Stacy Barten Date 6/05

Printed Name and Title Stacy Barthe President

Form LD-2 (Rev.6/98)

Page