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LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

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Ch	eck if this is an Amen	ded Registration	1. Effective Date of Registration 4/1/2004	r				
2.	House Identification	Number	Senate Identification Number					
R	EGISTRANT							
3.	Registrant Name	Fleishman-Hillard Government R	telations					
	Address	1775 Eye Street, N.W.	Suite 700					
	City	Washington	State DC Zip 20006					
4.	Principal place of bu City	usiness (if different from line 3)	State/Zip (or Country)					
5.	Telephone number a 202-551-1440	and contact name Contact Paul Sweet	E-Mail (optional) sweetp@fleishman.com					
6.	General description of registrant's business or activities Government Relations Consulting Firm							
C		bying firm is required to file a separate reg ed "Self" and proceed to line 10. Self	istration for each client. Organizations employing in-house lobbyists sho	ılı				
7.	Client Name	Kelley Blue Book						
	Address	5 Oldfield Road						
	City	Irvine	State CA Zip 92618					
8.	8. Principal place of business (if different from line 7) City State/Zip (or Country)							
9.	General description	of client's business or activities						
	in this section has se	erved as a "covered executive branch of	t as a lobbyist for the client identified on line 7. If any person liste ficial" or "covered legislative branch official" within two years of nd/or legislative position(s) in which the person served.					
	Name		Covered Official Position (if applicable)					
	Rod Chandler							
	John McCamman		Chief of Staff, Rep. Radanovich					
	Jeremy Shields							
	Paul Sweet	-						

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Form LD-1 (Rev. 06/98)

00000682337

ant Name:	Fleishman-Hil	Fleishman-Hillard Government Relations						
Client Name:	Kelley Blue Be	ook				<u></u> ල		
LOBBYING ISSUES 11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1 TAX 12. Specific lobbying issues (current and anticipated) tax treatment of charitable contribution of vehicles								
								tity other than the eriod and in who
	Name		Address		Principal Place of Busin (city and state or count			
b) direc	oreign entity that s at least 20% eq tly or indirectly,	uitable ownership in	or part, plans, s	iny organization identified of upervises, controls, directs,				
c) is an		-		on line 13 and has a direct	interes	t in the outcome of the		
🔀 No. Sign	and date the regi	stration.	☐ Yes.	Complete the rest of this criteria above, the sign an		for each entity matching t the registration.		
Name		Address	S	Principal Place of Busi (city and state or coun		Amount of contribution for lobbying activities		
Signature	0	/w	/-		Date .	7/15/2004		

Printed Name and Title

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Form LD-1 (Rev. 06/98)