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04 MAR 29 PM 4:28

LOBBYING REPORT

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

1. Registrant Name <u>Tom Rodgers dba Carlyle C.</u>	
2. Address <input type="checkbox"/> Check if different than previously reported <u>911 Crescent Drive</u>	
3. Principal Place of Business (if different from line 2) City: <u>Alexandria</u> State/Zip (or Country) <u>Va. 22302</u>	
4. Contact Name <u>Tom Rodgers</u>	Telephone <u>703-837-8187</u>
7. Client Name <input type="checkbox"/> Self <u>FTaylor Natural Resource</u>	
5. Senat	6. House

TYPE OF REPORT 8. Year 03 Midyear (January 1-June 30) OR Year End (July

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 Lol

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 type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> ⇨ \$ <u>20,000</u> 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 the period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ _____ Expenses (nearest</p> <p>14. REPORTING METHOD. Check box to in accounting method. See instructions for descripti</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA d</p> <p><input type="checkbox"/> Method B. Reporting amounts under section Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section Internal Revenue Code</p>
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Signature [Handwritten Signature]

Printed Name and Title Tom C. Rodgers

LD-2 (REV. 6/98)

Registrant Name Tom Rodgers Client Name FLYL No
Resou

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 NAT (one per page)

16. Specific lobbying issues

Senate Bill 523

17. House(s) of Congress and Federal agencies contacted

Check if None

Senate Indian
Affairs Committee
House Revenue Committee

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

Name	Covered Official Position (if applicable)
<u>Tom Rodgers</u>	

19. Interest of each foreign entity in the specific issues listed on line 16 above

Check if None

Signature [Signature] Date 3/1/04

Printed Name and Title _____ / /

Form LD-2 (Rev. 6/98)

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