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



## LOBBYING REPORT Required to Company Aug 26 PM 2: 25

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

1 D - :			
1. Registrant Name			
Monte Ward, LLC	4114411444144444 <del>444</del> 444444444444444444	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,
2. Address Check if differ	ent than previously reported		
P.O. Box 3783			
3. Principal Place of Business (if diffe	rent from line 2)	•••••	
Crofton	MD		
	State/zip ( Telephone	(or Country)  E-mail (optional)	5. Senate ID #
4. Contact Name	•		287350-36
Monte N. Ward	(240) 506-6864	monte_n_ward@msn.com	20,000 00
7. Client Name 🔲 Self	>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>		6. House ID#
American College of Sports M	ledicine		37020000
INCOME OR EXP	ion Report	er Line 12 <b>OR</b> Line 13	11. No Lobbyin
12. Lobb	ying Firms	13. Organiza	tions
INCOME relating to lobbyin period was:	g activities for this reporting	<b>EXPENSES</b> relating to lobbying activities period were:	ties for this repo
Less than \$10,000 🖸		Less than \$10,000 🖸	
\$10,000 or more □ ➪ \$	•	\$10,000 or more □ ➪ \$	
10,000 of mote 4	Income (nearest \$20,000)	Ехр	enses (nearest \$20,00
Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income from the client (including all		14. REPORTING METHOD. Check accounting method. See instructions fo	
	y any other entity for lobbying	Method A. Reporting amounts u	sing LDA definit
activities on behalf of the clie	ent).	☐ Method B. Reporting amounts u Internal Revenue Co	nder section 603:
	_	☐ Method C. Reporting amounts u Internal Revenue Co	
Signature MyCu	(Jan)	Date - 8/19	4/04
	1944fe8-3f71-4335-bdd3-771fb76	<b>)</b> 508d6e - Page 1 of 12	I

LD-2 (REV. 4/03) PAGE 1

Registrant Name	Monte Ward, LLC	Client Name	American College of Sports Medicine
LOBBYING ACT engaged in lobbying	IVITY. Select as many coo	les as necessary to ag the reporting pe	reflect the general issue areas in which the riod. Using a separate page for each co
15. General issue are	a code MED (one	per page)	
16. Specific lobbying	; issues		
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18. Name of each inc	dividual who acted as a lobby	vist in this issue are	a
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19. Interest of each fo	reign entity in the specific iss	les listed on line 16	above
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Th. 12. ABT	Monte Ward, LLC	Client Name	American College of Sports Medicine
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	d. Attach additional page(s code <u>HCR</u> (one p		
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House of Represen Senate Department of Heal	tatives th and Human Services		
18. Name of each indiv	vidual who acted as a lobby	ist in this issue	агеа
20, 210, 210, 220, 220, 220, 220, 220, 2		· <del></del>	
·	Name		Covered Official Position (if applicable)
Monte N. Ward			
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19. Interest of each for	eign entity in the specific iss	l sues listed on line	16 above
Simulation II	Soull Jan		Date 8/14/04
SignaturePrinted Name and Title	MONTE Ung #cd944fe8-3f71-4335-bdd	JN20 3-771fb7608d6e -	

Form LD-2 (Rec. 4/03)

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Signature M	Zel Dan		Date
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Registrant Name	Monte Ward, LLC	Client Name	American College of Sports Medicine
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Signature	Jan Val		Date 8/14/04
Printed Name and Ti	16 MONTE (	CIEN	

Registrant Name	Monte Ward, LLC	Clie	nt NameAmer	rican College of Sports Medic
	late Page - Complete	ONLY where	registration informat	tion has changed.
20. Client new address				······································
21. Client new principal p	place of business (if different fr	rom line 20)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
City 22. New general descript	ion of client's business or activ	,,,,,naaanoa,,,,,,,,,,,,,,,,,,,,,,,,,,,	tate/Zip (or Country)	,
LOBBYIS'T UPD. 23. Name of each pr	ATE reviously reported individ	ual who is <b>no</b>	longer expected to act	t as a lobbyist for the clien
ISSUE UPDATE 24. General lobbyin	g issues previously repor	ted that no loi	nger pertain	
	RGANIZATIONS ng affiliated organization	(s)		
Na	nme		Address	Principal Place of (city and state or
		ization that is	no longer affiliated wi	th the registrant or client
FOREIGN ENT 27. Add the follow	TITES ing foreign entities			
Name	Addre	SS	Principal place of busin (city and state or count	ness Amount of contribution for lobbying activities
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affiliated organiza		ity that no long	er owns, <u>or</u> controls, <u>or</u> i	is affiliated with the registra
Signature	MONTE 1g #cd944fe8-3f71-4335-bd	d3-771fb7608d	25 16e - Page 11 of 12	

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