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# LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration

1. Effective Date of Registration \_\_\_\_\_

2. House Identification Number \_\_\_\_\_ Senate Identification Number \_\_\_\_\_

## REGISTRANT

3. Registrant name Cassidy & Associates

Address 1 Walnut Street

City Boston State MA Zip 02108

4. Principal place of business (if different from line 3)  
City \_\_\_\_\_ State/Zip (or Country) \_\_\_\_\_

5. Telephone number and contact name  
(617) 305-4161 Contact Barbara Dawe E-mail (optional) \_\_\_\_\_

6. General description of registrant's business or activities  
Government Relations Consultants

**CLIENT** *A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should be labeled "Self" and proceed to line 10.*  Self

7. Client name Elderhostel

Address 11 Avenue de Lafayette

City Boston State MA Zip 02111

8. Principal place of business (if different from line 7)  
City \_\_\_\_\_ State/Zip (or Country) \_\_\_\_\_

9. General description of client's business or activities  
Educational learning adventures for adults 55 and older

## LOBBYISTS

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any person in this section has served as a "covered executive branch official" or "covered legislative branch official" within two years of acting as a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

Name	Covered Official Position (if applicable)
<u>Scott Bosworth</u>	
<u>Kevin Coen</u>	
<u>James Conley</u>	
<u>Greg Gill</u>	



Registrant Name Cassidy & Associates Client Name Elderhostel

### LOBBYING ISSUES

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1

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12. Specific lobbying issues (current and anticipated)

Program Funding for new marketing efforts to assist past Sept. Rebound.

### AFFILIATED ORGANIZATIONS

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the a semiannual period and in whole or in major part plans, supervises or controls the registrant's lobbying:

- No ⇒ Go to line 14.  Yes ↓ Complete the rest of this section for each entity the criteria above, then proceed to line 14.

Name	Address	Principal Place of Bus (city and state or cou

### FOREIGN ENTITIES

14. Is there any foreign entity that:

- a) holds at least 20% equitable ownership in the client or any organization identified on line 13; **OR**  
b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or activities of the client or any organization identified on line 13; **OR**  
c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in tl of the lobbying activity?

- No ⇒ Sign and date the registration.  Yes ↓ Complete the rest of this section for ea matching the criteria above, then sign a registration.

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities

Signature Scott H. Bosworth Date December 15, 2001

Printed Name and Title Scott H. Bosworth CEO & President

~~CONFIDENTIAL~~

