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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 June 3,

2. House Identification Number _____

Senate Identification Number _____

REGISTRANT

3. Registrant name JANICE L. KEPHART, president 9/11 Security

Address 4501 Neptune Drive

City Alexandria State VA Zip 22309

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

5. Telephone number and contact name
703 619 9636 Contact janicekephart@yahoo.com E-mail (optional)

6. General description of registrant's business or activities
self-employed homeland security consultant

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

7. Client name Digimarc Corporation

Address _____

City Portland, OR (main office) State _____ Zip _____

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

9. General description of client's business or activities
identification security

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 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>Janice L. Kephart</u> | |
| | |
| | |

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Form LD-1 (Rev. 04/03)

Registrant Name _____ Client Name _____

LOBBYING ISSUES

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

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12. Specific lobbying issues (current and anticipated)

REAL ID

AFFILIATED ORGANIZATIONS

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

No ⇨ Go to line 14.

Yes ⇩ Complete the rest of this section for each entity matching the criteria above, then proceed to line 14.

| Name | Address | Principal Place of Business (city and state or country) |
|------|---------|---|
| | | |

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 subsidizes the lobbying 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 the outcome of the lobbying activity?

No ⇨ Sign and date the registration.

Yes ⇩ Complete the rest of this section for each entity matching the criteria above, then sign and date the registration.

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

Signature

Anita J. Keenan

Date

6/12/07

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Printed Name and Title JANICE L. KOPHART, President, 9/11 Security

Form LD-1 (Rev. 04/03)