

Clerk of the House of Representatives
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Washington, DC 20510

SECRETARY OF THE SENATE

04 AUG -5 PM 1:30

LOBBYING REPORT

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

1. Registrant Name Government Solutions Group, LLC			
2. Address <input type="checkbox"/> Check if different than previously reported P.O. Box 623			
3. Principal Place of Business (if different from line 2) City: Harrisburg State/Zip (or Country) PA, 17108			
4. Contact Name	Telephone	E-mail (optional)	5. Senate ID #
Robert L. Shuster	(717) 231-7700	rlshuster@klettrooney.com	5703236
7. Client Name <input type="checkbox"/> Self DDL Omni Engineering			6. House ID # 35192000

TYPE OF REPORT 8. Year 2004 Midyear (January 1-June 30) ☒ OR Year End (July 1-December 31) ☐

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 Lobbying ☐**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>24,000</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 this reporting period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description of method.</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 60 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 16 Internal Revenue Code</p>
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Signature

Robert L. Shuster

Printed Name and Title Robert L. Shuster, Manager

LD-1 (REV. 6/98)

Registrant Name Government Solutions Client Name DDL Omni Engineering

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the registrant engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code, information as requested. Attach additional page(s) as needed.

15. General issue area code BUD (one per page)

16. Specific lobbying issues

Secure appropriations in DOD bill for submarine combat systems.

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

☐ Check if None

U.S. House of Representatives

U.S. Senate

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

Name	Covered Official Position (if applicable)
Robert L. Shuster	

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

☒ Check if None

Signature

Robert L. Shuster

Date

7/23/04

Printed Name and Title _____

Form I.D-2 (Rev 6/08)

Page

Registrant Name Government Solutions Client Name DDL Omni Engineering

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the r engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code information as requested. Attach additional page(s) as needed.

15. General issue area code DEF (one per page)

16. Specific lobbying issues

Secure appropriations in DOD bill for submarine combat systems.

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

☐ Check if None

U.S. House of Representatives

U.S. Senate

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

Name	Covered Official Position (if applicable)
Robert L. Shuster	

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

☒ Check if None

Signature Robert L. Shuster Date 7/23/04

Printed Name and Title ROBERT E. STROGER, M.D.

Form LD-2 (Rev. 6/98)

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