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 RECEIVED SECRETARY OF THE SENATE

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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 299 09 2
REGISTRANT 3. Registrant name CAPITUL ID	EAS. LCC
Address 2012 N- 0Ak	LAND ST.
	State VA Zip ZZ
4. Principal place of business (if different from line 3) City	State/Zip (or Country)
5. Telephone number and contact name 202-669-6590 Contact	ge FOF GRADUN E-mail (optional) (a p
6. General description of registrant's business or activities	S
CLIENT A Lobbying firm is required to file a separate registration for labeled "Self" and proceed to line 10. Self 7. Client name From A Howf-	or each client. Organizations employing in-house labbyists should ch
Address 1153 1574 S	7., NW #720
City WASHINGTON	State $0 \le Z_{ip}$
0 To 1 1 1 C1 1 (10 10 0 11 -	State/Zip (or Country) CA 9
9. General description of client's business or activities HOME FIMAWON	
LOBBYISTS 10. Name of each individual who has acted or is expected to a in this section has served as a "covered executive branch off acting as a lobbyist for the client, state the executive and/or	ficial" or "covered legislative branch official" within two
Name	Covered Official Position (if applicable)
OFOF GRADIEN	***************************************

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Form L.D-1 (Rev. 04/03)			
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Registrant Name CAU	OL 10543	LLC Client l	Name FEO. Hom	E LOAN BANK	
LOBBYING ISSUES 11. General lobbying issue are	3			-	
BAN HOU					
12. Specific lobbying issues (current and anticipa	ted) , LFG).	SLATIN		
				<u> </u>	
AFFILIATED ORG. 13. Is there an entity other to a semiannual period and No ⇔ Go to line 1	han the client that c I in whole or in majo	ontributes mor or part plans, so Yes & Co	ipervises or controls the	ction for each entity matchin	
Name		Address		Principal Place of Busi	
***************************************		4=>>=49900141,***************	***************************************	(city and state or count	
•					
FOREIGN ENTITI 14. Is there any foreign en				,	
a) holde at leas	t 20% equitable own	ership in the c	ient or any organization	identified on line 13; Or	
b) directly or in	ndirectly, in whole o	r in major part,	plans, supervises, contro	ols, directs, finances or subsi	
activities of	the client or any org	anization ident	ified on line 13; Or		
		organization i	dentified on line 13 and l	has a direct interest in the ou	
of the lobby	ing activity?				
No ⇔ Sign and da	ate the registration.	Ţ	Yes	the rest of this section for eache criteria above, then sign a	
		:			
Name	Addr	ess	Principal place of business	contribution for	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		(city and state or coun		
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	20				
	XIII	 	•	9/7/09	
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Signature	<u></u>		Date	
<i>).</i>	GEOF	GRADIEN,	FOUNDER	
Printed Name and Title	<u> </u>			