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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 7/15/2002

2. House Identification Number _____

Senate Identification Number _____

REGISTRANT

3. Registrant name The Cap Analysis Group

Address 1299 Pennsylvania Ave. N.W.

City Washington

State DC

Zip 20004

4. Principal place of business (if different from line 3)

City Same

State/Zip (or Country) _____

5. Telephone number and contact name

(202) 383-6908

Contact J. T. Wolfe

E-mail (optional) wolfet@

6. General description of registrant's business or activities

economic, accounting and environmental consulting

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

7. Client name American Chemistry Council

Address 1300 Wilson Blvd.

City Arlington

State VA

Zip 22209

8. Principal place of business (if different from line 7)

City Same

State/Zip (or Country) _____

9. General description of client's business or activities

Trade Association

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)
J. Thomas Wolfe	N/A

Registrant Name The Cap Analysis Group Client Name American Chemistry Council

LOBBYING ISSUES

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

ENV

12. Specific lobbying issues (current and anticipated)

"definition of solid waste" rulemaking

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 t 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 : registration.

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

Signature J. Thomas Wolfe Date 8-13-02

Printed Name and Title J. THOMAS WOLFE, VICE CHAIRMAN, CAP ANALYSIS GR

