

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
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# LOBBYING REPORT AM IC

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

1. Registrant name

Organization **Richard L. Collins**

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2. Address  Check if different than previously reported

**2111 Wilson Boulevard, Suite 700** Suite **700**

City **Arlington** State **VA** Zip Code **22201** Country **US**

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3. Principal place of business (if different than line 2)

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Country \_\_\_\_\_

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4a. Contact Name Prefix Full Name b. Telephone number c. E-mail

**Ms T.L. Alexis Wears** **703-351-5058** **alex@collinsandcompany.com**

5. Senate ID # **9922-758**

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7. Client Name  Self

**Chicago Province of the Society of Jesus**

6. House ID # **32772051**

**TYPE OF REPORT** 8. Year **2005** Midyear (January 1-June 30)  OR Year End (July 1-December)

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 Acti

### INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

#### 12. Lobbying Firms

INCOME relating to lobbying activities for this reporting period was:

Less than \$10,000

\$10,000 or more  ⇨ \$ **20,000**

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).

#### 13. Organizations

EXPENSES relating to lobbying activities for this reporting were:

Less than \$10,000

\$10,000 or more  ⇨ \$ \_\_\_\_\_

14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of opti

- Method A.** Reporting amounts using LDA definitions or
- Method B.** Reporting amounts under section 6033(b)(8), Internal Revenue Code
- Method C.** Reporting amounts under section 162(e) of t Revenue Code

Form Co

Printed Name and Title **T.L. Alexis Wears, Associate**

0000122029



Registrant Name Richard L. Collins Client Name Chicago Province of the Society of

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

15. General issue area code EDU - Education (one per page)

16. Specific lobbying issues

Appropriations

17. House(s) of Congress and Federal agencies contacted  Check if None

Senate, House, & USAID

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

First Name	Name Last Name	Suffix	Covered Official Position (if applicable)
James D.	Bond		
Christina D.	West		
Nancy L.	Kohler		

19. Interest of each foreign entity in the specific issues listed on line 16 above  Check if None

0000122030

Printed Name and Title T.L. Alexis Wears, Associate *T. Alexis* Feb 14 06

LD-2DS (REV. 4/03)

Registrant Name **Richard L. Collins** Client Name **Chicago Province of the Society of**

**Information Update Page - Complete ONLY where registration information has changed.**

20. Client new address

Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Country \_\_\_\_\_

21. Client new principal place of business (if different than line 20)

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Country \_\_\_\_\_

22. New general description of client's business or activities

\_\_\_\_\_

**LOBBYIST UPDATE**

23. Name of each previously reported individual who is no longer expected to act as a lobbyist for the client

	First Name	Last Name	Suffix	First Name	Last Name	S
1	Allison L.	Dane		3		
2				4		

**ISSUE UPDATE**

Find the code to select below.

24. General lobbying issues that no longer pertain

\_\_\_\_\_

**AFFILIATED ORGANIZATIONS**

25. Add the following affiliated organization(s)

Name	Address	Principal place of Business (city and state or country)
	Address _____ C/S/Z _____	City _____ State _____ Country _____
	Address _____ C/S/Z _____	City _____ State _____ Country _____

26. Name of each previously reported organization that is no longer affiliated with the registrant or client

1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_

**FOREIGN ENTITIES**

27. Add the following foreign entities

Name	Street Address	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	Overseas client
	City _____	State/Province _____ Country _____	City _____ State _____ Country _____		

28. Name of each previously reported foreign entity that no longer owns, or controls, or is affiliated with the registrant affiliated organization

1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_ 4 \_\_\_\_\_ 5 \_\_\_\_\_ 6 \_\_\_\_\_

Add a page for more

0000122031

Printed Name and Title **T.L. Alexis Wears, Associate** *T. Wears* **Feb 14 06**

