Clerk of the House of Representatives Secretary of the Senate Legislative Resource Center B-106 Cannon Building Washington, DC 20515

Office of Public Records 232 Hart Building Washington, DC 20510

SECRETARY OF T 02 APR 18

LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Ch	eck if this is an Amende	d Registration	1. Effective Date of Registration	4/16/2002			
House Identification Number			Senate Identification Number				
R	EGISTRANT						
3.	Registrant Name	FH/GPC					
	Address	601 13th Street Suite 410S					
	City	Washington,DC	State Zip 20005	USA			
4.	Principal place of busi City	ness (if different from line 3)	State/Zip (or Country)				
5.	Telephone number and 202-737-7485	contact name Contact Matthew LaRocco	E-Mail (optional) laroccom@fh-gpc.com				
6.	General description of	registrant's business or activities					
C]		ing firm is required to file a separate reg "Self" and proceed to line 10. D Seli Arab Academy of Banking and F		ig in-house lobbyists sh			
-	Address PO Box 13190						
	City	Amman	State Zip	Jordan			
8.	Principal place of busin	siness (if different from line 7) State/Zip (or Country)					
9.	General description of Post-Secondary Educ	on of client's business or activities Education					
	in this section has serv	ed as a "covered executive branch or	ct as a lobbyist for the client identified on lin fficial" or "covered legislative branch officia and/or legislative position(s) in which the pe Covered Official Positio	d" within two years or rson served.			
	Larry LaRocco						
	Matthew LaRocco						

ויטווו דידו- ו (עבאי מסגאס)

Registrant Name:	FH/GPC		00020	7102131			
Client Name:	Arab Academy of Banking and Financial Sciences						
LOBBYING IS		. Select all applicable co	des listed ir	instructions and on the rev	erse side of Form LD-1, page		
12. Specific lobbyii No Specific Le	-	rent and anticipated)					
	y other than th	he client that contributes		\$10,000 to the lobbying act or controls the registrant's lo			
🔀 No. Go to l	■ No. Go to line 14.		☐ Yes.	Complete the rest of this scriteria above, then proceed	section for each entity matchi ed to line 14.		
7	Vame		A	ddress	Principal Place of Br (city and state or co		
FOREIGN EN	TITIES						
b) directly of the c	at least 20% ed y or indirectly client or any c	quitable ownership in th , in whole or in major porganization identified o	art, plans, son n line 13; on		n line 13; or finances, or subsidizes activit interest in the outcome of the		
🔀 No. Sign an	id date the reg	gistration.	☐ Yes.	Complete the rest of this scriteria above, the sign an	section for each entity matchi d date the registration.		
Name		Address		Principal Place of Busin (city and state or count			
Signature		ry LaRocco - Vice-Ch			Date 4/19/2002		

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