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LOBBYING REPORT

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

1. Registrant Name Carl E. Schmid II			
2. Address <input type="checkbox"/> Check if different than previously reported 1602B Belmont Street, NW			
3. Principal Place of Business (if different from line 2) Washington DC 20009 City: State/zip (or Country)			
4. Contact Name Carl Schmid	Telephone (202) 462-3042	E-mail (optional) carschmid@aol.com	5. Senate ID # 51742-12
7. Client Name <input type="checkbox"/> Self Whitman Walker Clinic			6. House ID # 34829001

TYPE OF REPORT 8. Year 2003 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	
12. Lobbying Firms INCOME relating to lobbying activities for this reporting period was: Less than \$10,000 <input checked="" type="checkbox"/> \$10,000 or more <input type="checkbox"/> ⇔ \$ _____ Income (nearest \$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 period were: Less than \$10,000 <input type="checkbox"/> \$10,000 or more <input type="checkbox"/> ⇔ \$ _____ Expenses (nearest \$20,000)
14. REPORTING METHOD. Check box to indicate exp accounting method. See instructions for description of opt <input type="checkbox"/> Method A. Reporting amounts using LDA definition <input type="checkbox"/> Method B. Reporting amounts under section 6033(t) Internal Revenue Code <input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code	

Signature



Date

8/13/03

Registrant Name Carl E. Schmid II Client Name Whitman Walker Clinic

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

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

16. Specific lobbying issues

Needle exchange program for the District of Columbia

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

House of Representatives and US Senate

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

Name	Covered Official Position (if applicable)
Carl Schmid	
Pat Hawkins	Associate Executive Director

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

Signature  Date 8/13/03

Printed Name and Title Carl E. Schmid II Public and Government Affairs Consultant

Registrant Name Carl E. Schmid II Client Name Whitman Walker Clinic

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

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

16. Specific lobbying issues

Needle exchange program for the District of Columbia

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

House of Representatives and US Senate

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

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Carl Schmid
Pat Hawkins	Associate Executive Director
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Signature  Date 8/13/03

Printed Name and Title Carl E. Schmid II Public and Government Affairs Consultant

