

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

LOBBYING REPORT

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

1. Registrant name			
Organization	Price Howlett, Inc.		
2. Address <input checked="" type="checkbox"/> Check if different than previously reported			
726 S. Poplar St.			
City	Denver	State	CO
Zip Code	80224	Country	US
3. Principal place of business (if different than line 2)			
City		State	
Zip Code		Country	
4a. Contact Name		b. Telephone number	c. E-mail
Prefix	Full Name		
Mr.	Marjorie E Price	303-433-3955	marge@pricehowlett.com
7. Client Name <input type="checkbox"/> Self			5. Senate ID #
Swope Ridge Geriatric Center			6. House ID #
			32723007

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 Activ

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p>12. Lobbying Firms</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ _____</p> <p>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).</p>	<p>13. Organizations</p> <p>EXPENSES relating to lobbying activities for this reporting were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ _____</p> <p>14. REPORTING METHOD. Check box to indicate exper accounting method. See instructions for description of optio</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definitions on</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Revenue Code</p>
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Form Cor

Printed Name and Title Marjorie E Price, President *Marjorie E. Price 8/11/05*

000040936

Registrant Name Price Howlett, Inc.

Client Name Swope Ridge Geriatric Center

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

15. General issue area code BUD - Budget/Appropriations (one per page)

16. Specific lobbying issues

Add page to continue specific issues description for this issue >

Appropriations - intergenerational center

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

Senate
House

18. Name of each individual who acted as a lobbyist in this issue area Add a page to continue adding lobbyists for th

First Name	Name Last Name	Suffix	Covered Official Position (if applicable)
J David	Howlett		
Marjorie E	Price		

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

Add a page for a differe.

Printed Name and Title Marjorie E Price, President

Marjorie E. Price

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Registrant Name Price Howlett, Inc. Client Name Swope Ridge Geriatric Center

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	Su
1			3		
2			4		

ISSUE UPDATE

24. General lobbying issues that **no longer** pertain

Find the code to select below.

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

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

1	2	3
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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	Own per ce 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, c affiliated organization

1	3	5
2	4	6

Add a page for more ut

Printed Name and Title Marjorie E Price, President *Marjorie E Price Sr*

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