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

RECRETARY OF THE SENATE

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LOBBYING REPORT

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

1. Registrant Nume Troutman Sanders LLP			
t. Registram Address (Check if diff Address 1300 I Street, N.W. City Washington		Suite 500, East Tower DC 20005 USA	
3. Principal Place of Business (if different f	toon luse 2)		
City	State/Zip (or Country)		
4. Coman Name Kevin C. Fitzgerald	Telephone E-ma 202-274-2955	5. Senate ID # 38530-75	
7. Client Name 🔲 Self Duke Power Cumpany			6. House ID# 30622915
	_		11. No Lobbying Activity
INCOME OR EXPENS	ES - Complete Eithe	r Line 12 OR Line 13	
INCOME OR EXPENS 12. Lebbying I INCOME relating to lobbying active	ES - Complete Eithe		izations
INCOME OR EXPENS 12. Lebbying I INCOME relating to lobbying active period was: Less than \$10,000	ES - Complete Eithe	r Line 12 OR Line 13 13. Organ EXPENSES relating to lobbying a	izations
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INCOME OR EXPENS 12. Lobbying InCOME relating to lobbying active period was: Less than \$10,000 \$\overline{\text{S}}\$ \$10,000 or more \$\overline{\text{S}} >> \$\overline{\text{S}}\$ Provide a good faith estimate, round \$20,000 of all lobbying related incompletely including all payments to the registion.	ES - Complete Eithe Firms vities for this reporting neome (nearest \$20,000) dod to the nearest ome from the client trant by any other entity	T Line 12 OR Line 13 13. Organ EXPENSES relating to lobbying a period were: Less than \$10,000	Expenses (nearest \$20,000) heck box to indicate expense is for description of options. Is using LDA definitions only sunder section 6033(b)(8) of the Code is under section 162(c) of the

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Client new adde	TSS .					
Client new print	cipul place of business (if diff	esem from line 20)	······································			
. · y	Si	ate/Zip (or Country)		•		
ī <u> </u>	scriptem of client's business o					
		utividual who is no le	nger expected to act as a lobb	syist for the client		
SUE UPDAT 4. General lobb	FE bying issues previously	reported that no longe	≆ pertain			
	ORGANIZATIONS owing affiliated organiz					
Name		A	Address		Principal Place of Business (city and state or country)	
OREIGN EN		rganization that is no	longer affiliated with the regi	strant or client		
Name		Addrew	Principal Place of Business	Amount of contribution	Ownership %	
111111111111111111111111111111111111111		, 10000000	(city and state or country)	for lobbying activities	in client	

8. Name of eac or affiliated		oreign entity that no le	onger owns, or controls, or is	affiliated with the registr	ant, client,	
gnature	6-	erald - Manazing Pa	tiged Da	e <u>8/25/99</u>		