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 SECRETARY OF THE PUBLIC RECO

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LOBBYING REPORT

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

1. Registrant Name Meyers & Associates			
2. Registrant Address	S	uite One, Lobby Level C 20003	
3. Principal Place of Business (if different from line 2)	Cip (or Country)		
4. Contact Name Teleph Larry Meyers 202-4		(optional) neyers@meyersandassociates.com	5. Senate ID # 25077-990
7. Client Name			6. House ID#
9. Check if this filing amends a previously fil 10. Check if this is a Termination Report INCOME OR EXPENSES - 0	>> Termination	Date	11: No Lobb
	>> Termination	Date	
INCOME OR EXPENSES - O	>> Termination Complete Either	Line 12 OR Line 13	ions

Signature _____

Client Name:		
	Anzaldous Bridge	
engaged in lobbyir	FIVITY. Select as many codes as necessary ag on behalf of the client during the reporting uested. Attach additional page(s) as needed.	to reflect the general issue areas in which the registrant period. Using a separate page for each code, provide
15. General issue		
16. Specific Lob HR 4613, S	bying issues 2559, Defense Appropriations,	
	Congress and Federal agencies contacted epresentatives	☐ Check if None
18. Name of each	ch individual who acted as a lobbyist in this i	ssue area
18. Name of each	ch individual who acted as a lobbyist in this i	Ssue area Covered Official Position (if applicable)
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Meyers, La	arry	Covered Official Position (if applicable)

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. General issu	e area code ROD (one per page)	
. Specific Lob HR 3550, T	bying issues ransportation Reauthorization,	
7 House(s) of	Congress and Federal agencies contacted	☐ Check if None
House of R	epresentatives	
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	ch individual who acted as a lobbyist in this is:	sue area Covered Official Position (if applicable)
Name		
Name Meyers, L	arry	
Name	arry	
Name Meyers, L	arry	
Name Meyers, L Meyers, R	arry	Covered Official Position (if applicable)
Name Meyers, L Meyers, R	ick	Covered Official Position (if applicable)
Name Meyers, L Meyers, R	ick	Covered Official Position (if applicable) on line 16 above Check if None