

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

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06 AUG 11

LOBBYING REPORT

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

1. Registrant name					
Prefix	Mr.	First	Michael	Last	Korens
2. Address <input type="checkbox"/> Check if different than previously reported					
Address1 7122 Old Dominion Drive					
City		McLean	State	VA	Zip Code 22101
Country US					
3. Principal place of business (if different than line 2)					
City			State		Zip Code
City			State/Zip or Country		Country
4a. Contact Name		b. Telephone number		c. E-mail	
Prefix	Full Name				
Mr.	Michael Korens	703.356.3130		mkorens@mindspring.com	
7. Client Name <input type="checkbox"/> Self				5. Senate ID #	
NAV CANADA				304656-5	
				6. House ID #	
				38044002	

TYPE OF REPORT 8. Year 2006 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 ☐

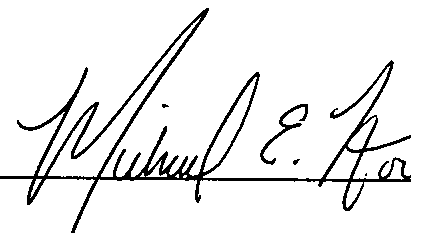
10. Check if this is a Termination Report ☐ ⇨ Termination Date _____ 11. No Lobbying Activity ☐

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms	13. Organizations
INCOME relating to lobbying activities for this reporting period was:	
Less than \$10,000 <input type="checkbox"/>	
\$10,000 or more <input checked="" type="checkbox"/> ⇨ \$ <u>20,000</u>	
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).	
EXPENSES relating to lobbying activities for this reporting period were:	
Less than \$10,000 <input type="checkbox"/>	
\$10,000 or more <input type="checkbox"/> ⇨ \$ _____	
14. REPORTING METHOD. Check box to indicate expected accounting method. See instructions for description of options.	
<input type="checkbox"/> Method A. Reporting amounts using LDA definitions only	
<input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8), Internal Revenue Code	
<input type="checkbox"/> Method C. Reporting amounts under section 162(c) of the Internal Revenue Code	

Printed Name and Title Michael E. Korens, Principal

LD-2DS (Rev. 4/07)



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Registrant Name Michael Korens

Client Name NAV CANADA

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 cod information as requested. Attach additional page(s) as needed.

15. General issue area code AVI - Aviation/Aircraft/Airlines (one per page)

16. Specific lobbying issues

Procurement of air navigation technologies

17. House(s) of Congress and Federal agencies contacted ☐ None ☒ House ☒ Senate ☒ Other

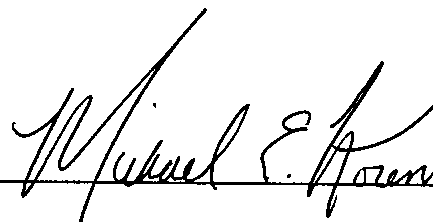
House of Representatives
Senate
Department of Transportation
Federal Aviation Administration

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

First Name	Name Last Name	Suffix	Covered Official Position (if applicable)
Michael	Korens		

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

Printed Name and Title Michael E. Korens, Principal



Registrant Name Michael Korens

Client Name NAV CANADA

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	City
	C/S/Z	State
	Address	Country
	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

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 perce 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

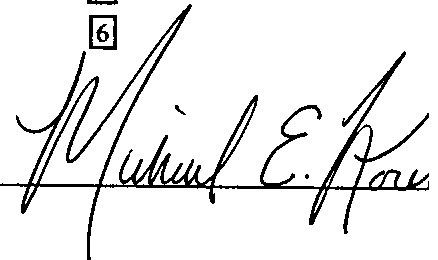
5

2

4

6

Printed Name and Title Michael E. Korens, Principal





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