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Office of Public Records
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SECRETARY OF THE SENATE

05 FEB 23 AM 11:14

LOBBYING REPORT

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

| | | | |
|---|----------------------|---------------------|-----------|
| 1. Registrant name | | | |
| Organization | Tew Cardenas LLP | | |
| 2. Address <input type="checkbox"/> Check if different than previously reported | | | |
| 1717 Pennsylvania Ave., NW, Suite 650 | | | |
| City | Washington | State | DC |
| Zip Code | 20006 | Country | USA |
| 3. Principal place of business (if different than line 2) | | | |
| City | State | Zip Code | Country |
| City | State/Zip or Country | Zip Code | Country |
| 4a. Contact Name | | b. Telephone number | c. E-mail |
| Prefix | Full Name | | |
| Mr. | J. Eric Gould | 202-974-1399 | |
| 7. Client Name <input type="checkbox"/> Self | | 5. Senate ID # | |
| Ana Martinez | | 284573-12 | |
| | | 6. House ID # | |
| | | 36766007 | |

TYPE OF REPORT 8. Year 2004 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 Activities ☐**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"/> ⇨ \$ _____ 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"/> ⇨ \$ _____ 14. REPORTING METHOD. Check box to indicate expense 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) of Internal Revenue Code <input type="checkbox"/> Method C. Reporting amounts under section 162(e) of Internal Revenue Code |
|---|--|

Form Cor

Printed Name and Title Sloan Rappoport, Partner

Client Name Ana Martinez

15. General issue area code GOV - Government Issues (one per page)

Add page to continue specific issues description for this issue

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

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

[illegible]

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

Stan R

Add a page for a differe

Registrant Name Tew Cardenas LLPClient Name Ana Martinez**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 UPDATE23. 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

Suffix

1

3

2

4

ISSUE UPDATE

Find the code to select below.

24. General lobbying issues that **no longer** pertain**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 Country |
| | Address | City |
| | C/S/Z | 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 | Address | Principal place of business (city and state or country) | Amount of contribution for lobbying activities | Own percent client |
|------|-----------------------------|--|---|--------------------------|
| | Street Address | | | |
| | 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

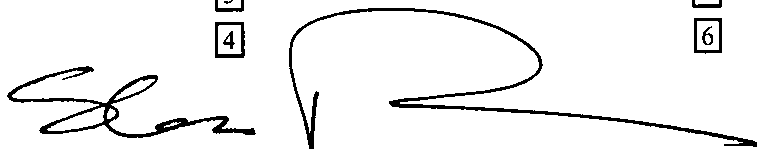
3

5

2

4

6



Add a page for more up

Printed Name and Title Sloan Rappoport, Partner

