

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  
04 JAN 14 PM 2

# LOBBYING REPORT

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

1. Registrant Name <b>NATIONAL WOODEN PALLET + CONTAINER ASSN (NWPCA)</b>			
2. Address <input type="checkbox"/> Check if different than previously reported <b>329 SOUTH PATRICK STREET</b>			
3. Principal Place of Business (if different from line 2) City: <b>ALEXANDRIA</b> State/Zip (or Country) <b>VA 22314</b>			
4. Contact Name <b>BRUCE N. SCHOLNICK</b>	Telephone <b>703-519-6104</b>	E-mail (optional) <b>bscholnick@palletcentral.com</b>	5. Senate ID # <b>678</b>
7. Client Name <input type="checkbox"/> Self			6. House ID # <b>35694</b>

TYPE OF REPORT 8. Year 2003 Midyear (January 1-June 30)  OR Year End (July 1-Dec)

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 Lobbyin

## INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p><b>12. Lobbying Firms</b></p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Income (nearest \$20,000)</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><b>13. Organizations</b></p> <p>EXPENSES relating to lobbying activities for this reporting period were:</p> <p>Less than \$10,000 <input checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (nearest \$20,000)</p> <p><b>14. REPORTING METHOD.</b> Check box to indicate accounting method. See instructions for description</p> <p><input checked="" type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 60 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 16 Internal Revenue Code</p>
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Signature B. N. Scholnick

Printed Name and Title BRUCE N. SCHOLNICK, PRESIDENT/CE

LD-2 (REV. 6/98)

Registrant Name NWPCA Client Name \_\_\_\_\_

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

15. General issue area code MAN (one per page)

16. Specific lobbying issues

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

10/9/03 U.S. DEPT. OF AGRICULTURE - APHIS

12/8/03 DEPT. OF LABOR, OSHA, OSHA ALLIANCE COORDINATOR

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

Name	Covered Official Position (if applicable)
BRUCE N. SCHOLNICK	

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



1/1/1

00000433299

Signature \_\_\_\_\_ Date 1/6/04

Printed Name and Title BRUCE N. SCHOLNICK, PRESIDENT/CE

Form I.D.-2 (Rev 6/98)

Page

Registrant Name NWPCA Client Name \_\_\_\_\_

00000433300

**Information Update Page - Complete ONLY where registration information has changed.**

20. Client new address

N/A

21. Client new principal place of business (if different from line 20)

City N/A State/Zip (or Country) \_\_\_\_\_

22. New general description of client's business or activities

N/A

**LOBBYIST UPDATE**

23. Name of each previously reported individual who is **no longer** expected to act as a lobbyist for the client

**ISSUE UPDATE**

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

N/A

**AFFILIATED ORGANIZATIONS**

25. Add the following affiliated organization(s)

Name	Address	Principal Place of Bu (city and state or cc
<u>N/A</u>		

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


N/A

**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
<u>N/A</u>			

28. Name of each previously reported foreign entity that **no longer** owns, or controls, or is affiliated with the registrant or affiliated organization

Signature  Date 1/6/04

Printed Name and Title BRUCE W. SCHOLNICK, PRESIDENT/CEO

Form 1 D 2 (Rev. 6/98)