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SECRETARY OF THE SENATE
04 AUG -2 PM

LOBBYING REPORT

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

1. Registrant Name Robert E. McLean			
2. Address <input type="checkbox"/> Check if different than previously reported 1911 N Fort Myer Drive, Suite 702			
3. Principal Place of Business (if different from line 2) Arlington VA 22209 City: State/zip (or Country)			
4. Contact Name	Telephone	E-mail (optional)	5. Senate ID #
Robert E. McLean	(703) 875-3003	bmclean@mailers.org	24613
7. Client Name <input type="checkbox"/> Self Mailers Council			6. House ID # 33655000

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	
<p>12. Lobbying Firms</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"/> ⇌ \$ <u>13,200.00</u> 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>13. Organizations</p> <p>EXPENSES relating to lobbying activities for this reporting period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇌ \$ _____ Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate the accounting method. See instructions for description of each method.</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code</p>

Signature

Robert E. McLean

Date

7-20-04

Printed Name and Title Robert E. McLean, Executive Director, Mailers Council

LD-2 (REV. 4/03)

PAGE 1

Printed Name and Title _____

Form LD-2 (Rec. 4/03)

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