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LOBBYING REPORT

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

1. Registrant Name Capstrat			
2. Address <input type="checkbox"/> Check if different than previously reported 1201 Edwards Mill Road, Suite 102 Raleigh, NC 27607			
3. Principal Place of Business (if different from line 2) City: _____ State/zip (or Country) _____			
4. Contact Name Frank Hill	Telephone (703) 876-0920	E-mail (optional) fhill@capstrat.com	5. Senate ID # 37085001
7. Client Name <input type="checkbox"/> Self ECDC			6. House ID # 37085001

TYPE OF REPORT 8. Year 2004 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 Lobbying

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p align="center">12. Lobbying Firms</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input checked="" 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 align="center">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 603 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162 Internal Revenue Code</p>
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Signature _____

Date _____

Printed Name and Title

LD-2 (REV. 4/03)

PAGE 1

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Registrant Name Capstrat Client Name ECDC

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

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

16. Specific lobbying issues

water and sewer grants
historic preservation
911 call center support

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

Department of Agriculture

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

Name	Covered Official Position (if applicable)
Frank Hill	

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

Signature *[Handwritten Signature]* Date 11/15/04

Printed Name and Title 1/14/15 ANDREW MCCOM K.S. COM

Form LD-2 (Rec. 4/03)

Page 2