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LOBBYING REPORT

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

1. Registrant Name GOLDSBOROUGH & ASSOCIATES			
2. Address <input type="checkbox"/> Check if different than previously reported 5508 LOMBARDY PL., BALTO., MD. 21210			
3. Principal Place of Business (if different from line 2) City: _____ State/Zip (or Country) _____			
4. Contact Name ROBERT H. GOLDSBOROUGH		Telephone (410) 435-7086	E-mail (optional)
5. Senate ID # 1647			6. House ID # 33484
7. Client Name <input type="checkbox"/> Self AMERICAN IMMIGRATION CONTROL INC., NON-PROFIT CORP.			

TYPE OF REPORT 8. Year 2001 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

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:	EXPENSES relating to lobbying activities for this reporting period were:
Less than \$10,000 <input type="checkbox"/>	Less than \$10,000 <input type="checkbox"/>
\$10,000 or more <input checked="" type="checkbox"/> ⇨ \$ <u>20,000.00</u> Income (nearest \$20,000)	\$10,000 or more <input type="checkbox"/> ⇨ \$ _____ Expenses (nearest \$20,000)
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).	14. REPORTING METHOD. Check box to indicate reporting method. See instructions for description of method. <input type="checkbox"/> Method A. Reporting amounts using LDA definition <input type="checkbox"/> Method B. Reporting amounts under section 6033(e) Internal Revenue Code <input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code

Signature

Robert H. Goldsborough

Printed Name and Title

ROBERT H. GOLDSBOROUGH

PRESIDENT



Registrant Name GOLDSBOROUGH & ASSOC. Client Name AMERICAN IMMIGRATION CONTROL II

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, provide the information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

REDUCE LEGAL IMMIGRATION
STOP ILLEGAL "
USE OF MILITARY TO ASSIST BORDER PATROL

17. House(s) of Congress and Federal agencies contacted

Check if None

HOUSE OF REPRESENTATIVES & SENATE

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

Name	Covered Official Position (if applicable)
<u>ROBERT F. GOLDSBOROUGH</u>	

19. Interest of each foreign entity in the specific issues listed on line 16 above

Check if None

Signature Robert H. Goldsborough Date 7-24-01

Printed Name and Title ROBERT H. GOLDSBOROUGH, PRESIDENT

