Clerk of the House of Representatives Secretary of the Senate Legislative Resource Center B-106 Cannon Building Washington, DC 20515

Office of Public Records 232 Hart Building Washington, DC 20510

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LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Che	eck if this is an Amen	ded Registration	1. Effective Date of Registration 10/17/02 Senate Identification Number			
2.	House Identification					
RI	EGISTRANT					
3.	Registrant Name	Williams & Jensen, PC				
	Address	1155 21st Street, NW	Suite 300			
	City	Washington	State DC Zip 20036			
4.	Principal place of b	usiness (if different from line 3)	State/Zip (or Country)			
5.	Telephone number a 202-659-8201	and contact name Contact Barbara W. Bonfiglio	E-Mail (optional)			
6.	General description of registrant's business or activities Law Firm					
C :		obying firm is required to file a separate reg	istration for each client. Organizations employing in f	1-house lobbyists should		
7.	Client Name	Cablevision				
	Address	1111 Stewart Avenue				
	City	Beth Page	State NY Zip 11714			
8.	Principal place of b	ousiness (if different from line 7)	State/Zip (or Country)			
9.	General description of client's business or activities Telecommunications					
	in this section has s	served as a "covered executive branch of	act as a lobbyist for the client identified on lin official" or "covered legislative branch officia and/or legislative position(s) in which the per	l" within two years of		
	Name		Covered Official Positio	n (if applicable)		
	Bertram W. Carp	ı				
	Susan Hirshmani	n				

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Form LD-1 (Rev. 06/98)

00030050102

Registrant Name:	Williams & Jensen, PC					
Client Name:	Cablevision					
LOBBYING 11. General lobby LBR, TEC		pplicable codes listed in	instructions and on the reverse sid	e of Form LD-1, page 1.		
12. Specific lobb	oying issues (current and ant chostar/Direct TV Merger	icipated)				
13 Is there an er	period and in whole or majo	at contributes more than	\$10,000 to the lobbying activities or controls the registrant's lobbying Complete the rest of this section criteria above, then proceed to li	activities? for each entity matching		
	Name	A	ldress	Principal Place of Bus (city and state or cour		
FOREIGN F	ENTITIES foreign entity that:					
a) holb) direof tc) is a	ds at least 20% equitable ov ectly or indirectly, in whole the client or any organizatio	or in major part, plans, s n identified on line 13; o	ny organization identified on line upervises, controls, directs, financo on line 13 and has a direct interes	es, or subsidizes activitie		
🔀 No. Sig	n and date the registration.	☐ Yes.	Complete the rest of this section criteria above, the sign and date	for each entity matching the registration.		
Name	e	Address	Principal Place of Business (city and state or country)	Amount of contributi		
Signature	ment	mpeli	- Date	2/14/2003		

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Printed Name and Title

Form LD-1 (Rev. 06/98)