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 SENATE

LOBBYING REPORT

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

1. Registrant name		
Organization Mayforth Group, LLC		
2. Address Check if different than previously reported		
408 Broadway		
City Providence State F	Zip Code 02909	Country USA
3. Principal place of business (if different than line 2)		
City State	Zip Code	Country
City State/Z 4a. Contact Name b. Telephone number Prefix Full Name	cip or Country c. E-mail	5. Senate ID#
	auliffe@mayforthgroup.com	
7. Client Name Self Newport County Chamber of Commerce		6. House ID # 36092010
TYPE OF REPORT 8. Year 2004 Midyear (Januar	ry 1-June30) 🔲 OR Yea	ar End (July 1-December 3
9. Check if this filing amends a previously filed version of this report	y reduction of red	ii Elia (July 1 Becellioe: J
10. Check if this is a Termination Report ☐ □ Termination Date		11. No Lobbying Active
INCOME OR EXPENSES - Complete Either Line 1	2 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 were:	
Less than \$10,000 🔲	Less than \$10,000	
\$10,000 or more \$ \(\square \) \$ 40,000	\$10,000 or more	S
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 expenaceounting method. See instructions for description of option	
	Method B. Reporting amount	nts using LDA definitions only under section 6033(b)(8) ϵ
	Internal Revenue Method C. Reporting amoun Revenue Code	e Code nts under section 162(e) of the
Printed Name and Title Richard M. McAuliffe, Jr., Chairma	My /ba/bs	Form Con

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istrant Name Mayforth Group, LLC		Client Name Newport County Chamber of Comme	
pehalf of the	client during the re	ecessary to reflect the general issue areas in which the reporting period. Using a separate page for each code needed.	
DEF - De	efense	(one per page)	
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unty with upco	oming BRAC proce) 	
s and Federal	l agencies contact	ed Check if None	
dual who acte		this issue area Covered Official Position (if applicable)	
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	Y. Select as behalf of the color de DEF - Description of the color de Description of the color de DEF - Desc	Y. Select as many codes as no behalf of the client during the red. Attach additional page(s) as DEF - Defense on the sues sues such as and Federal agencies contacted tives dual who acted as a lobbyist in Name Last Name Suffix	

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