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

## LOBBYING REPORT

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

Registrant Name			
Smith Alling Lane			************************
. Address Check if different than previou	ısly reported		
701 Pennsylvania Ave., NW, Suite	675		
. Principal Place of Business (if different from lin			
City: Washington	State/Z	p (or Country) DC 20004	
. Contact Name	Telephone	E-mail (optional)	5. Senate ID#
Tim Schellberg	(253) 627-1091	tims@smithallinglane.com	543
. Client Name			6. House ID#
Prepared Response			3505
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LD-2 (REV. 6/98)

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Registrant Name	Smith Alling Lane	Client Name	Prepared Response
engaged in lobbying	VITY. Select as many coo on behalf of the client durested. Attach additional pa	ing the reporting period.	t the general issue areas in which the r Using a separate page for each code
15. General issue ar	ea code BUD (or	ne per page)	
16. Specific lobbyin		t. Office of Justice Programs	s funding for building mapping program.
U.S. Senate	ngress and Federal agenci	es contacted $\Box$	Check if None
Department of	Homeland Security  ndividual who acted as a !	obbyist in this issue area	
Tim Schellberg	Name		Covered Official Position (if applicable)
,	1844-000-000-00-00-00-00-00-00-00-00-00-00	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
}*************************************			
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••••••			
19. Interest of each	foreign entity in the specific	issues listed on line 16 abo	ve Check if None
Signature			Date 1-28-0
	Tim Schellberg Gover illing #fd872df9-3925-4cf7-9	nment Affairs Consultant 446-e055cd18f709 - Page	3 of 6

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Registrant Name	Smith Alling Lane	Client Name	Client Name Prepared Response			
nformation Up	date Page - Complete Ol	NLY where regist	ration information has cha	anged.		
20. Client new address						
21. Client new principal	place of business (if different from	line 20)	***************************************	***************************************		
City		State/Zip (or Country)				
22. New general descri	ption of client's business or activitie	<b>es</b>	,			
LOBBYIST UPI 23. Name of each p	previously reported individua	l who is <b>no longer</b>	expected to act as a lobbying	st for the client		
AFFILIATED O	ing issues previously reported		rtain			
25. Add the following affiliated organizatio  Name		Address		Principal Place of Bu		
26. Name of each	previously reported organiza	ation that is no lon	ger affiliated with the regist	rant or client		
FOREIGN ENTI	ITIES wing foreign entities					
Name	Addr	ress	Principal place of business (city and state or country)	Amount of contribution for lobbying activities		
affiliated or	h previously reported foreign ganization	entity that no long	er owns, <u>or</u> controls, <u>or</u> is	affiliated with the regist		

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Date\_

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