

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

LOBBYING REPORT

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

1. Registrant Name <u>Campaign For America</u>			
2. Address ☐ Check if different than previously reported <u>50 F Street, N.W. Suite 1198 Washington, D.C. 20001</u>			
3. Principal Place of Business (if different from line 2) City: _____ State/Zip (or Country) _____			
4. Contact Name <u>Cheryl Perrin</u>		Telephone <u>(202) 628-0610</u>	5. Senate ID # <u>78814-12</u>
6. Client Name ☒ Self		6. House ID # <u>3387500</u>	

TYPE OF REPORT 8. Year 2000 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 Activity ☐

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 ☐	Less than \$10,000 ☐
\$10,000 or more ☐ ⇒ \$ _____ Income (nearest \$20,000)	\$10,000 or more ☒ ⇒ \$ <u>338,257.73</u> Expenses (nearest \$20,000)
14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options.	
☒ Method A. Reporting amounts using LDA definitions only	
☐ Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code	
☐ Method C. Reporting amounts under section 162(e) of the Internal Revenue Code	

Signature Cheryl Perrin

Printed Name and Title _____

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PAGE 1 of _____

Registrant Name Campaign For America Client Name _____

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

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

16. Specific lobbying issues

Urge passage of meaningful campaign finance reform in the House and Senate. Advocated for a soft money ban and for improved disclosure, including disclosure of political organizations established under Section 527 of the IRS code.

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

☐ Check if None

House of Representatives

Senate

Internal Revenue Service

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

Name	Covered Official Position (if applicable)	New
Cheryl Perrin		☐
Elaine Franklin		☐
Mary Warren		☐
		☐
		☐
		☐
		☐
		☐

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

☒ Check if None

Signature

Cheryl Perrin

Date 03/30/01

Printed Name and Title

Registrant Name Campaign For America Client Name _____

Information Update Page - Complete ONLY where registration information has changed.

20. Client new address _____

21. Client new principal place of business (if different from line 20) _____

City _____

State/Zip (or Country) _____

22. New general description of client's business or activities _____

LOBBYIST UPDATE

23. Name of each previously reported individual who is **no longer** expected to act as a lobbyist for the client _____

ISSUE UPDATE

24. General lobbying issues previously reported that **no longer** pertain _____

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s) _____

Name	Address	Principal Place of Business (city and state or country)

26. Name of each previously reported organization that is **no longer** affiliated with the registrant or client _____

FOREIGN ENTITIES

27. Add the following foreign entities _____

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	Ownership percentage in client

28. Name of each previously reported foreign entity that **no longer** owns, or controls, or is affiliated with the registrant, client or affiliated organization _____

Signature _____

Date _____

Printed Name and Title _____

Form LD-2 (Rev. 6/98)

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