SECRETARY OF THE SENATE OF ON ON ON ON ON ON ON

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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 REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration	1. Effective Date of Registration 2-03
2. House Identification Number 35 831 000	Senate Identification Number 53195
REGISTRANT  3. Registrant name $56447000$	NoultiNG
Address 1961 ARRIVETON	PIDGE LANG
City VIENNA	State VA Zip 22182
4. Principal place of business (if different from line 3)  City	State/Zip (or Country)
5. Telephone number and contact name  703-893-1819 Contact/11	1/1941 O'KEFE E-mail (optional) ATT. NET
6. General description of registrant's business or activities	
	for each client. Organizations employing in-house lobbyists should check the box
Inbeled "Self" and proceed to line 10. Self	sulting
Address 5505 4	ber Court
City GAINES Ville	State 1/1 Zip 20155
8. Principal place of business (if different from line 7)  City	State/Zip (or Country)
9. General description of client's business or activities	TING
LOBBYISTS  10. Name of each individual who has acted or is expected to a this section has served as a "covered executive branch of acting as a lobbyist for the client, state the executive and	act as a lobbyist for the client identified on line 7. If any person listed in official" or "covered legislative branch official" within two years of first Vor legislative position(s) in which the person served.
Name	Covered Official Position (if applicable)
WILLIAM O'KEERE	rounder & President

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LOBBYING ISSUES		_li_i_i_sensions and on	the vevere	cide of Form I.D. I	Share 1	
11. General lobbying issue areas. Select all			i me tevetse	side of Louist CD-1	D	
<u> 7RD</u> 7c	IN ENG				$\omega$	
12. Specific lobbying issues (current and an	nticipated)					
Sud AN POA						
SANction	13					
AFFILIATED ORGANIZATI	ONC					
3. Is there an entity other than the clien		ore than \$10,000 to t				
a semiannual period and in whole or					activities?	
					<u>*</u>	
No ⇒ Go to line 14.	Yes I Complete the rest of this section for each entity matching					
		the criteria above,			7040- 105 AS	
Name	Address		Principal Place of Business (city and state or country)			
				55		
€						
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	7520			<b>1</b>		
FOREIGN ENTITIES					%	
14. Is there any foreign entity that:						
3450690X 543 43		<b>10</b> 10 0 <b>€</b> 03333	**************************************			
a) holds at least 20% equitab						
b) directly or indirectly, in w				ects, illiances ui	20D3IGISC3	
activities of the client or a c) is an affiliate of the client	or any organization	identified on line 13.	and has a d	lirect interest in t	he outcome	
of the lobbying activity?	or any organization					
No ⇒ Sign and date the registra	ation.	☐ Yes   Complete		his section for ca above, then sign		
		registratio		above, then sign	atifu (tate ut	
	Address	Principal place of		Amount of	Ownership	
Name Address		business		ontribution for	percentage	
		(city and state or cour	ntry) lot	bying activities	in client	
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my	g June			- 2 - 51	aj:——ali	
Signature	<del>////</del>		Date	-2-04		
Printed Name and Title William	OKEET	Fe Presi	de 215			
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