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SECRETARY OF THE
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Clerk of the House of Representatives	Secretary of the Senate
Legislative Resource Center	Office of Public Records
B-106 Cannon Building	232 Hart Building
Washington, DC 20515	Washington, DC 20510

LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Has this registrant previously registered with the Office of the Clerk? ☐ Yes ☒ No

1. Effective Date of Registration 4/16/06

2. House Identification Number _____ Senate Identification Number _____

REGISTRANT

3. Registrant name Organization The Scott Group, PLLC

Address 3050 K Street, NW Suite 400

City Washington State DC Zip 20007 USA

4. Principal place of business (if different than line 3)

City State Zip

5. Telephone number and contact name Prefix Full Name

202-342-8412 Contact Mr. Douglas Kantor E-mail dkantor@thescottgroupdc.com

6. General description of registrant's business or activities

Law Firm

CLIENT

A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should check the box labeled "Self" and proceed to line 10. ☐ *Self*

7. Client name Council of Insurance Agents and Brokers

Address 701 Pennsylvania Ave, NW Suite 705

City Washington State DC Zip 20004 Country

8. Principal place of business (if different than line 7)

City State Zip Country

9. General description of client's business or activities

Trade Association

LOBBYISTS

Go to page 3 to add more lobby

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any person listed section has served as a "covered executive branch official" or "covered legislative branch official" within two years of first act a lobbyist for the client, *state the executive and/or legislative position(s) in which the person served.*

Name First	Name Last	Name Suffix	Covered Official Position (if applicable)
R. Timothy	Columbus		
Mr. Thomas J.	Bliley		
Scott	Sinder		
James	Barnette		Counsel, House Energy and Commerce Committee
Douglas	Kantor		

Registrant Name The Scott Group, PLLC Client Name Council of Insurance Agents and Brokers

LOBBYING ISSUES

Find the code to select below.

Go to page 3 to add more lobbying issu

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1, page 1.

INS BAN

12. Specific lobbying issues (current and anticipated)

Banking and Insurance Issues

AFFILIATED ORGANIZATIONS

Go to page 3 to add more organizatic

13. Is there an entity other than the client that contributes more than $10,000 to the lobbying activities of the registrant in a semiannual period **and** in whole or in major part plans supervises or controls the registrant's lobbying activities?

☒ No ⇨ Go to line 14. ☐ Yes ⇨ Complete the rest of this section for each entity matching the criteria above, then proceed to line 14.

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

FOREIGN ENTITIES

Go to page 3 to add more foreign ent

14. Is there any foreign entity that:

a) holds at least 20% equitable ownership in the client or any organization identified on line 13: **or**

b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or subsidizes activitie the client or any organization identified on line 13; **or**

c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in the outcome of the lobbying activity?

☒ No ⇨ Sign and date the registration. ☐ Yes ⇨ Complete the rest of this section for each entity matching the criteria above, then sign and date the registration.

Name	Address Street Address City State/Province Country	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	Owners percent in clie

Form Comple

Printed Name and Title

Registrant Name The Scott Group, PLLC

Client Name Council of Insurance Agents and Brokers

ADDITIONAL LOBBYISTS

Return to page 2 to finish the form

10 Supplemental. List any additional lobbyists for this client not listed on page 1, number 10.

Name			Covered Official Position (if applicable)
First	Last	Suffix	
John	Fielding		
Leslie	Belcher		

ADDITIONAL LOBBYING ISSUES

Return to page 2 to finish the form

11 Supplemental. General lobbying issue areas. Enter any additional codes for issues not listed on page 2, number 11.

Find the code to select below.

AFFILIATED ORGANIZATIONS

Return to page 2 to finish the form

13 Supplemental. List any other affiliated organization that meets the criteria specified and is not listed on page 2, number 13.

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

ADDITIONAL FOREIGN ENTITIES

Return to page 2 to finish the form

14 Supplemental. List any other foreign entity that meets the criteria specified and is not listed on page 2, number 14.

Name	Address			Principal place of business (city and state or country)	Amount of contribution for lobbying activities	Owners percentage i
	Street Address City	State/Province	Country			

Add an additional supplementary information pa

Printed Name and Title [signature] Member