Go t

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

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

05 FEB 17 AM 10: 18

LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

1. Effective Date of Registration 10/04/04

2. House Identification Number _____ Senate Identification Number _____

REGISTRANT

3. Registrant name Organization Jefferson Consulting Group, LLC

Address 1401 K Street N.W. Suite 900

City Washington State DC Zip 20005 US

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

City State Zip

5. Telephone number and contact name Prefix Full Name

202.626.8550 Contact Ms. Pamela Trucano E-mail ptrucano@jeffersonconsulting

6. General description of registrant's business or activities

Federal Marketing, Lobbying & Consulting

CLIENT

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

7. Client name Hydration Technologies, Inc.

Address 2482 Ferry Street

City Albany State OR Zip 97322 Country

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

City State Zip Country

9. General description of client's business or activities

Forward Osmosis Water Filtration Devices

LOBBYISTS

Go to page 3 to add more

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 l section has served as a "covered executive branch official" or "covered legislative branch official" within two years of fi 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)
Robert	Thompson		
Timothy	Leeth		
Barbara	Stansfield		
Michelle	McWhinney		
Marilynn	Booth		

Go t

Registrant Name Jefferson Consulting Group, LLC Client Name Hydration Technologies, Inc.

LOBBYING ISSUES

Find the code to select below.

Go to page 3 to add more lobbyi

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

DEF DIS

12. Specific lobbying issues (current and anticipated)

HR 4613 Department of Defense appropriations bill pertaining to congressional earmarks for hydration techn and future bills in disaster relief

AFFILIATED ORGANIZATIONS

Go to page 3 to add more orga

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 criteria above, then proceed to line 14.

Name	Address	Principal place of Busine (city and state or countr

FOREIGN ENTITIES

Go to page 3 to add more forei

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 ac 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 o lobbying activity?

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

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

Form Cor

Printed Name and Title Pamela Trucano, Executive Assistant

Go t

Registrant Name Jefferson Consulting Group, LLC Client Name Hydration Technologies, Inc.

ADDITIONAL LOBBYISTS

Return to page 2 to finish

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	

ADDITIONAL LOBBYING ISSUES

Return to page 2 to finish

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

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

Name	Address	Principal place of Busines (city and state or countr

ADDITIONAL FOREIGN ENTITIES

Return to page 2 to finish

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	(perce
	Street Address	City	State/Province Country			

Add an additional supplemental (optional)

Printed Name and Title Pamela Trucano, Executive Assistant