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[redacted]-2005-07052005120930

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

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LOBBYING REPORT

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

1. Registrant Name: **CMA STRATEGIES**			
2. Address ☐ Check if different than previously reported **201 ROBERT S KERR #301**			
City: **OKLAHOMA CITY**	State: **OK** Zip: **73102** Country: **USA**		
3. Principal place of business (if different from line 2) City: State: **OK** Zip: Country: **USA**			
4. Contact Name: **JENNIFER HOLLAND**	Telephone: **405-236-0971**	Email: **jennifer@cmastrategies.com**	5. Senate ID # **84150-137**
7. Client Name: **CHEROKEE NATION ENTERPRISES**			6. House ID # **36386006**

Type of Report 8. Year (YYYY) **2005** Midyear (Jan 1-Jun 30) ◉ **or** Year End (Jul 1-Dec 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

INCOME relating to lobbying activites for this reporting period was:

☑ Less than $10,000 ($0.00 - $9,999.99)

☐ $10,000 or more

Provide a good faith estimate, rounded to the nearest $20,000, of all lobbying related income from the client (including all payments to the registrant by any other entity for lobbying activities on behalf of the client).

13. Organizations

EXPENSES relating to lobbying activites for this reportin period were:

☐ Less than $10,000 ($0.00 - $9,999.99)

☐ $10,000 or more

14. REPORTING METHOD. Check box to indicate exp accounting method. See instructions for description of opti

☐ **Method A.** Reporting amounts using LDA definitions

☐ **Method B.** Reporting amounts under section 6033(b)(the Internal Revenue Code

☐ **Method C.** Reporting amounts under section 162(e) c Internal Revenue Code

Signature: Jennifer Holland

Printed Name: **JENNIFER D. HOLLAND**
Title: **OFFICE MANAGER**

https://opr.senate.gov/cgi-win/ss_rep_viewer.exe

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[redacted] Lobbying Activity

[redacted]-2005-07052005120930

[redacted]trant Name:
[redacted]MA STRATEGIES

Client Name:
CHEROKEE NATION ENTERPRISES

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 **IND**

16. Specific lobbying issues (current and anticipated)

Any issues dealing with Native American tribes

17. House(s) of Congress and Federal agencies contacted. __ Check if none.

SENATE	HOUSE OF REPRESENTATIVES

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

Name	Covered Official Position (if applicable)
MCFERRON, PAT	N/A
NELSON, N. JASON	N/A

19. Interest of each foreign entity in the specific issues listed on line 16 above. X Check if none.

Printed Name:
JENNIFER D. HOLLAND

Date: 7/5/2005
Title:
OFFICE MANAGER

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[redacted]-2005-07052005120930

Registrant Name: **CMA STRATEGIES** Client Name: **CHEROKEE NATION ENTERPI**

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

CLIENT

Client Name:

Address:

City: State: Zip:
Country: **USA**

Principal place of business (if different from above) State/Country:
City: Country: **USA**

General description of client's business or activities:

LOBBYISTS UPDATE

23. Name(s) of each previously reported individual who is NO LONGER expected to act as a lobbyist for the client.

Name	Covered Official Position (if applicable)
LONG, SBARINA	**N/A**

ISSUE UPDATE

24. General lobbying issue(s) 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:

Name

FOREIGN ENTITIES

27. Add the following foreign entities:

Name	Address	Principal Place of Business (city and state or country)		Amount of contributions 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 or affiliated organization:

Name

Signature: Jennifer Hellard Date: **07/05/05**

Printed Name:
JENNIFER D. HOLLAND

Title: **OFFICE MANAGER**

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