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

SECRETARY OF 1
07 OCT 15 P

LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check One: ☑ New Registrant ☐ New Client for Existing Registrant ☐ Amendment

1. Effective Date of Registration 03/2

2. House Identification _____ Senate Identification _____

REGISTRANT ☐ Organization ☑ Individual

3. Registrant Prefix Mr. First Lonnie Last Johnson

Address 703 E. 3rd Street Address2

City Royal Oak State MI Zip 48067 - Coun

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

City State Zip - Coun

5. Contact name and telephone number ☐ International Number

Contact Mr. Lonnie Johnson Telephone (313) 820-9341 E-mail johnsonlon@hotmail.com

6. General description of registrant's business or activities

Public Advocacy

CLIENT

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

7. Client name Michigan League for Human Services

Address 1115 S. Pennsylvania Ave. Ste. 202

City Lansing State MI Zip 48912 - Coun

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

City State Zip - Coun

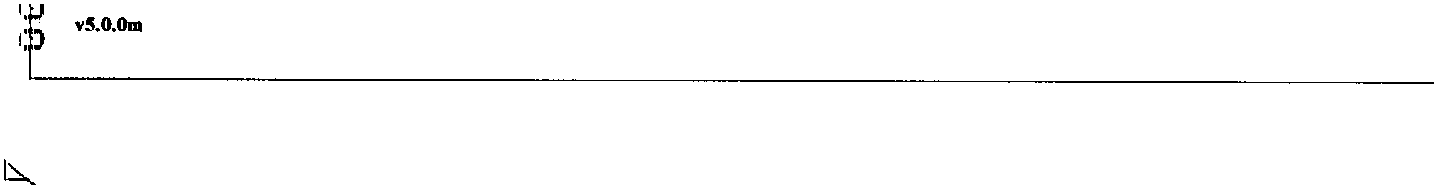
9. General description of client's business or activities

Statewide citizens non-profit organization dedicated to education, research and advocacy.

LOBBYISTS

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 pers this section has served as a "covered executive branch official" or "covered legislative branch official" within two years of a lobbyist for the client, *state the executive and/or legislative position(s) in which the person served.*

Name			Covered Official Position (if applicable)
First	Last	Suffix	
Lonnie	Johnson		


v5.0.0m

LOBBYING ISSUES

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

HCR WEL

12. Specific lobbying issues (current and anticipated)

Children's Health Care and Food Stamps.

AFFILIATED ORGANIZATIONS

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 matchin criteria above, then proceed to line 14.

Name	Address					Principal Place of Busin
	Street					
	City	State/Province	Zip Code	Country		
					City	
					State	Country
					City	
					State	Country
					City	
					State	Country

FOREIGN ENTITIES

14. Is there any foreign entity

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 activ 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 t lobbying activity?

☑ No --> Sign and date the registration. ☐ Yes --> Complete the rest of this section for each entity matchin the criteria above, then sign the registration.

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

Signature ✓ Digitally Signed By: Lonnie B Johnson **Date** 10/05/

US, DST Aces Unaffiliated Individual, Lonnie B Johnson

Printed Name and Title Lonnie Johnson