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

SECRETARY OF THE SENATE
02 JUN 25 PM 2:34

LOBBYING REPORT

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

1. Registrant Name
JOHN FRESHMAN ASSOC., INC.

2. Address ☐ Check if different than previously reported
1050 THOMAS JEFFERSON STREET, NW

3. Principal Place of Business (if different from line 2)
City: WASHINGTON State/Zip (or Country) DC, 20007

4. Contact Name	Telephone	E-mail (optional)	5. Senate ID
SUZANNE O'CONNOR	(202) 965-5198	soconnor@johnfreshman.	

7. Client Name ☐ Self
MONTEREY COUNTY ADMINISTRATIVE OFFICE

6. House ID
30

TYPE OF REPORT

8. Year 2001 Midyear (January 1-June 30) ☐ **OR** Year End (July 1-D

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 Lobby

INCOME OR EXPENSES - Complete Either Line 12 **OR** Line 13

12. Lobbying Firms

INCOME relating to lobbying activities for this reporting period was:

Less than $10,000 ☐

$10,000 or more ☑ ⇨ $ $40,000.00
Income (nearest $20,000)

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 activities for this period were:

Less than $10,000 ☐

$10,000 or more ☐ ⇨ $
Expenses (nearest $2

14. REPORTING METHOD. Check box to indic accounting method. See instructions for description

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

☐ **Method B.** Reporting amounts under section 6 Internal Revenue Code

☐ **Method C.** Reporting amounts under section 1 Internal Revenue Code

Signature _____

Printed Name and Title _____

Registrant Name JOHN FRESHMAN ASSOC., INC. Client Name MONTEREY COUNTY ADMINISTRATIVE

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which t engaged in lobbying on behalf of the client during the reporting period. **Using a separate page for each c** information as requested. Attach additional page(s) as needed.

15. General issue area code ENV (one per page)

16. Specific lobbying issues

Sudden Oak Death Syndrome Control Act of 2001, all provisions.
H.R. 2144, S. 997

17. House(s) of Congress and Federal agencies contacted ☐ Check if None

Senate
House of Representatives

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

Name	Covered Official Position (if applicable)
John D. Freshman	
Lawrence P. Kast	

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

Signature _____ Date _____

Printed Name and Title _____



Registrant Name JOHN FRESHMAN ASSOC., INC. Client Name MONTEREY COUNTY ADMINISTRATIVE (

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which t engaged in lobbying on behalf of the client during the reporting period. **Using a separate page for each c** information as requested. Attach additional page(s) as needed.

15. General issue area code BUD (one per page)

16. Specific lobbying issues

H.R. 2330, S. 1215 FY2002 Agriculture Appropriations, funding for Sudden Oak Death Syndrome.
H.R. 2217, FY2002 Interior Appropriations, funding for Sudden Oak Death Syndrome.
H.R. 2500, S. 1215 Commerce, Justice, State and Judiciary Appropriations, funding for DEA programs.

17. House(s) of Congress and Federal agencies contacted ☐ Check if None

Senate
House of Representatives

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

Name	Covered Official Position (if applicable)
John D. Freshman	
Lawrence P. Kast	

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

Signature _____ Date _____

Printed Name and Title _____

Registrant Name JOHN FRESHMAN ASSOC., INC. Client Name MONTEREY COUNTY ADMINISTRATIVE

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which t engaged in lobbying on behalf of the client during the reporting period. **Using a separate page for each c** information as requested. Attach additional page(s) as needed.

15. General issue area code MED (one per page)

16. Specific lobbying issues

H.R. 3487, S. 1864 Nurse Reinvestment Act, all provisions.

17. House(s) of Congress and Federal agencies contacted ☐ Check if None

Senate
House of Representatives

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

Name	Covered Official Position (if applicable)
John D. Freshman	
Lawrence P. Kast	

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

Signature _____ Date _____

Printed Name and Title _____

Registrant Name JOHN FRESHMAN ASSOC., INC. Client Name MONTEREY COUNTY ADMINISTRATIVE

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which t engaged in lobbying on behalf of the client during the reporting period. **Using a separate page for each** information as requested. Attach additional page(s) as needed.

15. General issue area code DIS (one per page)

16. Specific lobbying issues

H.R. 3448, Bioterrorism Preparedness Act, all provisions related to funding for first-responders, hospitals and rese facilities.

17. House(s) of Congress and Federal agencies contacted ☐ Check if None

Senate
House of Representatives

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

Name	Covered Official Position (if applicable)
John D. Freshman	
Lawrence P. Kast	

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

Signature _____ Date _____

Printed Name and Title _____

Registrant Name JOHN FRESHMAN ASSOC., INC. Client Name MONTEREY COUNTY ADMINISTRATIVE C

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

20. Client new address

21. Client new principal place of business (if different from line 20)

City State/Zip (or Country)

22. New general description of client's bus activities

LOBBYIST UPDATE

23. Name of each previously reported individual who is **no longer** expected to act as a lobbyist for the client

Kiefer, Catherine B.

ISSUE UPDATE

24. General lobbying issues previously reported that **no longer** pertain

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal Place of I (city and state or

26. Name of each previously reported organization that is **no longer** affiliated with the registrant or client

FOREIGN ENTITIES

27. Add the following foreign entities

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities

28. Name of each previously reported foreign entity that **no longer** owns, or controls, or is affiliated with the regist affiliated organization

Signature Suzanne O'Connor Date 2-15-02

Printed Name and Title SUZANNE O'CONNOR, DIRECTOR