

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 THE SENATE

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LOBBYING REPORT

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

1. Registrant Name The Charles Group			
2. Address ☐ Check if different than previously reported 18630 Reliant Drive			
3. Principal Place of Business (if different from line 2) Gaithersburg MD 20879 City: State/zip (or Country)			
4. Contact Name Marina Charles	Telephone (301) 977-8800	E-mail (optional)	5. Senate ID # N/A
7. Client Name ☐ Self Affinity Solutions, Inc			6. House ID # N/A

TYPE OF REPORT 8. Year 2003 Midyear (January 1-June 30) ☐ **OR** Year End (July 1-Decer)
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

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 ☐ ⇨ \$ _____ 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 reporting period were: Less than \$10,000 ☐ \$10,000 or more ☐ ⇨ \$ _____ Expenses (nearest \$20,000) 14. REPORTING METHOD. Check box to indicate exp accounting method. See instructions for description of opt ☐ Method A. Reporting amounts using LDA definition ☐ Method B. Reporting amounts under section 6033(l) Internal Revenue Code ☐ Method C. Reporting amounts under section 162(e) Internal Revenue Code
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Signature _____ Date _____

Printed Name and Title _____

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Registrant Name The Charles Group Client Name Affinity Solutions, Inc

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

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

16. Specific lobbying issues

drug prevention, grant funding under COPI

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

House of Representatives, Bureau of Justice Assistance

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

Name	Covered Official Position (if applicable)
Ben Bawden	
Rick Nagel	
Jason Baker	
Robert Charles (ended Oct. 3, 2003)	

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

Signature _____ Date 2/3/2004

Printed Name and Title Marina Charles, President

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Registrant Name The Charles Group Client Name Affinity Solutions, Inc

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 business or activities

LOBBYIST UPDATE

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

Robert B. Charles (ended oct. 3, 2003)

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 Bu: (city and state or cou

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 registrant, **or** is affiliated organization

Signature

Marvin T. Charles

Date 2/3/2004

Signature _____

Printed Name and Title Marina Charles, President

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