

**GOVERNMENT OF THE DISTRICT OF COLUMBIA  
BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY  
WASHINGTON, D.C. 20001**

Year 2013

Original  
 Amendment

**LOBBYIST ACTIVITY REPORT \***

(See next page for instructions) ID# \_\_\_\_\_

Type of Report:  January 2013 If you are filing a January Report, please indicate whether you intend to lobby in the upcoming calendar year.  Yes  No

July \_\_\_\_\_

1. (a) Registrant's Name ABC of Metro Washington (b) Daytime Phone Number  
(301) 595 - 9711

(c) Permanent Address 4061 Powder Mill Road, Suite 120 Calverton, MD 20705  
(Street Address) (City, State, Zip Code)

(d) Temporary Address 1725 Eye Street, NW, Suite 300 Washington, D.C. 20006 (while lobbying)  
(Street Address) (City, State, Zip Code)

2. Lobbyist (s) Working for Registrant: Attach a Supplemental Sheet if additional space is needed.

(a) Name <u>Eric J. Jones</u>	(b) Name <u>Robert "Bob" M. Zinsmeister</u>
Address <u>1725 Eye Street, NW, Suite 300</u> <small>(Street Address)</small>	Address <u>4061 Powder Mill Road, Suite 120</u> <small>(Street Address)</small>
<u>Washington, D.C. 20006</u> <small>(City, State, Zip Code)</small>	<u>Calverton, MD 20705</u> <small>(City, State, Zip Code)</small>
Daytime Phone Number <u>(202) 349 - 3821</u>	Daytime Phone Number <u>(301) 595-9711</u>

3. Person Compensating Registrant

(a) Name ABC of Metro Washington (b) Daytime Phone Number (301) 595 - 9711

(c) Address 4061 Powder Mill Road, Calverton, MD 20706  
(Street Address) (City, State, Zip Code)

(d) Nature of Business Construction Association

4. Terms of Compensation: (a) \_\_\_\_\_ Salary (b) \_\_\_\_\_ Duration of Employment

5. Identify matter(s) by subject and formal designation on which the lobbyist/registrant expects to lobby. Attach a Supplemental Sheet if additional space is needed.

Any legislation related to Construction, Building Codes, Hiring Preferences, Project Labor Agreements, Employer/Employee Benefits, Job and Workforce Training and other business related issues

\* REMINDER - Each new or previously registered Lobbyist must file a Lobbyist Registration Form by January 15<sup>th</sup> of each year.

6. Identify the official and title, if known, in the Executive or Legislative Branch with whom the registrant has had oral or written communication during the reporting period relating to lobbying activities, and the date that communication was made. Attach a Supplemental Sheet if additional space is needed.

Name	<u>Councilwoman Mary Cheh (D) Ward 3</u>	Date	<u>7/11/2012</u>
Name	<u>Councilman Vincent B. Orange, Sr (D) At - Large</u>	Date	<u>7/12/2012</u>
Name	<u>Chairman Phil Mendelson (D)</u>	Date	<u>7/24/2012</u>
Name	<u>Harold Pettigrew, Director, DSLBD</u>	Date	<u>8/21/2012</u>
Name	<u>Gene Fisher, Committee Clerk</u>	Date	<u>8/30/2012</u>
Name	<u>Lewis Brown, DOES</u>	Date	<u>9/14/2012</u>

7. Total compensation/receipts paid to the Lobbyist for lobbying during the reporting period: \$ 42874  
(Schedule A)
8. Total of other compensation/receipts received for lobbying services and compensation paid to others: \$ \_\_\_\_\_  
(Schedule A-1)
9. Total amount of Loans received by the Lobbyist in connection with lobbying during the reporting period: \$ \_\_\_\_\_  
(Schedule A-2)
10. Total receipts (Add Lines 7, 8, and 9) \$ 42874
11. Total of expenditures made for purposes of lobbying during the reporting period: \$ \_\_\_\_\_  
(Schedule B)
12. Total of other expenditures related to lobbying activities: \$ \_\_\_\_\_  
(Schedule B-1)
13. Total expenditures (Add Lines 11 and 12) \$ \_\_\_\_\_

<b>Name</b>	<b>Date</b>
<b>Councilman Kenyan McDuffie (D) Ward 5</b>	<b>9/20/2012</b>
<b>Councilman Marion Barry (D) Ward 8</b>	<b>9/25/2012</b>
<b>Deputy Mayor for Education De'Shawn Wright</b>	<b>11/12/2012</b>
<b>Councilman Vincnet B. Orange, Sr (D) Ward 5</b>	<b>12/6/2012</b>
<b>Councilman Michael A. Brown (I) At-Large</b>	<b>12/6/2012</b>
<b>Councilwoman Muriel Bowser (D) Ward 4</b>	<b>12/10/2012</b>
<b>Councilman Tommy Wells (D) Ward 6</b>	<b>12/10/2012</b>



**BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY**  
**LOBBYIST/EMPLOYEE LOBBYIST'S ACTIVITY REPORT PAGE \_\_\_ OF \_\_\_**  
**SCHEDULE A – COMPENSATION/RECEIPTS PAID TO THE LOBBYIST FOR LOBBYING:**

YEAR: 2012

Type of Report:  January 2013       July \_\_\_\_\_

Period Covering: July 1st, 2012 through December 31st, 2012

LOBBYIST/EMPLOYEE LOBBYIST'S NAME: Eric J. Jones

COMPENSATION/RECEIPTS PAID FOR LOBBYING (AMOUNTS MAY BE ROUNDED OFF TO WHOLE DOLLARS)					TOTAL THIS PERIOD	CUMULATIVE TOTAL (FEES/COMPENSATION)
EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER (FEES/COMPENSATION)						
<b>ABC of Metro Washington</b>					<b>42874</b>	<b>7469</b>
FEES/RETAINER	COMPENSATION					
\$42874	\$				\$	\$
						<b>8</b>
EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER (FEES/COMPENSATION)					TOTAL THIS PERIOD	CUMULATIVE TOTAL (FEES/COMPENSATION)
FEES/RETAINER	COMPENSATION					
\$	\$				\$	\$
EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER (FEES/COMPENSATION)					TOTAL THIS PERIOD	CUMULATIVE TOTAL (FEES/COMPENSATION)
FEES/RETAINER	COMPENSATION					
\$	\$				\$	\$
EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER (FEES/COMPENSATION)					TOTAL THIS PERIOD	CUMULATIVE TOTAL (FEES/COMPENSATION)
FEES/RETAINER	COMPENSATION					
\$	\$				\$	\$
<b>TOTAL RECEIPTS RECEIVED FOR LOBBYING (CARRY TOTAL FORWARD TO LINE 7)</b>					<b>\$</b>	<b>\$</b>

IF MORE SPACE IS NEEDED, CHECK BOX AND ATTACH SUPPLEMENTAL SHEET (SEE NEXT PAGE FOR INSTRUCTIONS)

**BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY  
 LOBBYIST/EMPLOYEE LOBBYIST'S ACTIVITY REPORT PAGE \_\_\_ OF \_\_\_  
 SCHEDULE A-1 -- LOBBYIST COMPENSATION/RECEIPTS RECEIVED FOR  
 LOBBYIST SERVICES AND COMPENSATION PAID TO OTHERS:**

YEAR: \_\_\_\_\_

Type of Report:  January \_\_\_\_\_  July \_\_\_\_\_

Period Covering: \_\_\_\_\_ through \_\_\_\_\_

LOBBYIST/EMPLOYEE LOBBYIST'S  
 NAME: \_\_\_\_\_

OTHER COMPENSATION/RECEIPTS RECEIVED BY THE LOBBYIST AND/OR LOBBYIST EMPLOYEE AND PAID BY THE COMPENSATING REGISTRANT FOR LOBBYIST ACTIVITIES IN THE DISTRICT						TOTAL THIS PERIOD	CUMULATIVE TOTAL
EMPLOYER'S NAME, ADDRESS, AND TELEPHONE NUMBER							
OFFICE EXPENSES	ADVERTISING & PUBLICATION EXP	PERSONAL EXPENSES	TRAVEL EXPENSES	COMPENSATION TO OTHER	OTHER EXPENSES		
\$	\$	\$	\$	\$	\$	\$	\$
EMPLOYER'S NAME, ADDRESS, AND TELEPHONE NUMBER							
OFFICE EXPENSES	ADVERTISING & PUBLICATION EXP	PERSONAL EXPENSES	TRAVEL EXPENSES	COMPENSATION TO OTHER	OTHER EXPENSES		
\$	\$	\$	\$	\$	\$	\$	\$
EMPLOYER'S NAME, ADDRESS, AND TELEPHONE NUMBER							
OFFICE EXPENSES	ADVERTISING & PUBLICATION EXP	PERSONAL EXPENSES	TRAVEL EXPENSES	COMPENSATION TO OTHER	OTHER EXPENSES		
\$	\$	\$	\$	\$	\$	\$	\$
EMPLOYER'S NAME, ADDRESS, AND TELEPHONE NUMBER							
OFFICE EXPENSES	ADVERTISING & PUBLICATION EXP	PERSONAL EXPENSES	TRAVEL EXPENSES	COMPENSATION TO OTHER	OTHER EXPENSES		
\$	\$	\$	\$	\$	\$	\$	\$
<b>TOTAL OTHER COMPENSATION/RECEIPTS RECEIVED FOR LOBBYING</b>						\$	\$
<b>(CARRY TOTAL FORWARD TO LINE 8)</b>							

IF MORE SPACE IS NEEDED, CHECK BOX AND ATTACH SUPPLEMENTAL SHEET A-1  
 (SEE NEXT PAGE FOR INSTRUCTIONS)



**BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY**  
**LOBBYIST/EMPLOYEE LOBBYIST'S ACTIVITY REPORT PAGE \_\_\_ OF \_\_\_**  
**SCHEDULE A-2 LOANS RECEIVED BY THE LOBBYIST**

YEAR: \_\_\_\_\_

Type of Report:  January \_\_\_\_\_  July \_\_\_\_\_

Period Covering: \_\_\_\_\_ through \_\_\_\_\_

LOBBYIST/EMPLOYEE LOBBYIST  
 NAME: \_\_\_\_\_

LOANS RECEIVED IN CONNECTION WITH LOBBYING ACTIVITY.						
<b>EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER</b>					<b>TOTAL LOANS THIS PERIOD TOTAL</b>	<b>CUMULATIVE LOAN TOTAL</b>
LOAN						
\$	\$	\$	\$		\$	\$
<b>EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER</b>					<b>TOTAL LOANS THIS PERIOD TOTAL</b>	<b>CUMULATIVE LOAN TOTAL</b>
LOAN						
\$	\$	\$	\$		\$	\$
<b>EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER</b>					<b>TOTAL LOANS THIS PERIOD TOTAL</b>	<b>CUMULATIVE LOAN TOTAL</b>
LOAN						
\$	\$	\$	\$		\$	\$
<b>EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER TOTAL</b>					<b>TOTAL LOANS THIS PERIOD TOTAL</b>	<b>CUMULATIVE LOAN TOTAL</b>
LOAN						
\$	\$	\$	\$		\$	\$
<b>TOTAL LOANS RECEIVED FOR THE PERIOD (CARRY TOTAL FORWARD TO LINE 9)</b>					\$	\$

IF MORE SPACE IS NEEDED, CHECK BOX AND ATTACH SUPPLEMENTAL SHEET  
 (SEE REVERSE SIDE FOR INSTRUCTIONS)

**BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY**  
**COMPENSATING REGISTRANT'S ACTIVITY REPORT PAGE \_\_\_ OF \_\_\_**  
**SCHEDULE B – EXPENDITURES PAID BY COMPENSATING REGISTRANT TO THE LOBBYIST**  
**YEAR: \_\_\_\_\_**

Type of Report:  January \_\_\_\_\_  July \_\_\_\_\_

Period Covering: \_\_\_\_\_ through \_\_\_\_\_

COMPENSATING REGISTRANT'S NAME: \_\_\_\_\_

PAYMENTS MADE IN CONNECTION WITH LOBBYING ACTIVITIES				
ACTIVITY EXPENSES INCURRED, OR PAID BY THE COMPENSATING REGISTRANT TO THE LOBBYIST AND/OR IN-HOUSE EMPLOYEE LOBBYIST FOR ACTIVITIES RELATIVE TO LOBBYING ACTIVITIES IN THE DISTRICT OF COLUMBIA.				
DATE	NAME AND ADDRESS OF PAYEE	PURPOSE OF COMPENSATION	TOTAL THIS PERIOD	CUMULATIVE TOTAL
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
<b>TOTAL EXPENDITURES PAID FOR LOBBYING (CARRY TOTAL FORWARD TO LINE 11)</b>			\$	\$

IF MORE SPACE IS NEEDED, CHECK BOX AND ATTACH SUPPLEMENTAL SHEET  
 (SEE NEXT PAGE FOR INSTRUCTIONS)

**BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY**  
**LOBBYIST/COMPENSATING REGISTRANT'S ACTIVITY REPORT PAGE \_\_\_ OF \_\_\_**  
**SCHEDULE B-1 -- OTHER EXPENDITURES**

YEAR: \_\_\_\_\_

Type of Report:  January \_\_\_\_\_  July \_\_\_\_\_

Period Covering: \_\_\_\_\_ through \_\_\_\_\_

COMPENSATING REGISTRANT'S NAME: \_\_\_\_\_

OTHER ACTIVITY EXPENSES INCURRED, OR PAID BY THE COMPENSATING REGISTRANT TO THE LOBBYIST AND/OR IN-HOUSE EMPLOYEE LOBBYIST FOR ACTIVITIES RELATIVE TO LOBBYING ACTIVITIES IN THE DISTRICT.

DATE	NAME OF RECIPIENT	DESCRIPTION OF CONSIDERATION	TYPE OF COMPENSATION PAID (LOANS, CONTRIBUTION, GIFT, HONORARIA, ETC.)	TOTAL
PAYMENT				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$

**TOTAL OTHER EXPENDITURES PAID FOR LOBBYING**  
**(CARRY TOTAL FORWARD TO LINE 12)**

- IF MORE SPACE IS NEEDED, CHECK BOX AND ATTACH SUPPLEMENTAL SHEET TO SCHEDULE B-1
- IF YOU HAVE NOT PAID, INCURRED, OR ARRANGED ANY OTHER ACTIVITY EXPENSES DURING THE PERIOD, CHECK THE BOX TO INDICATE THAT YOU HAVE NOTHING TO REPORT



**BOARD OF ETHICS AND  
GOVERNMENT  
ACCOUNTABILITY  
LOBBYIST ACTIVITY REPORT  
SCHEDULE C**

YEAR \_\_\_\_\_

(See next page for Instructions)

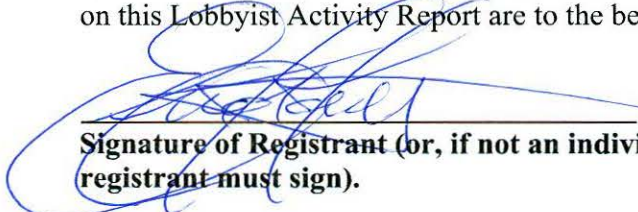
Type of Report:  January \_\_\_\_\_  July \_\_\_\_\_

Covering Period \_\_\_\_\_ through \_\_\_\_\_

LOBBYIST/COMPENSATING'S REGISTRANT'S NAME: \_\_\_\_\_

DATE	NAME	NATURE OF EMPLOYMENT WITH REGISTRANT

I, the undersigned, declare under oath and on penalty of perjury that the statements contained on this Lobbyist Activity Report are to the best of my knowledge, true, correct, and complete.

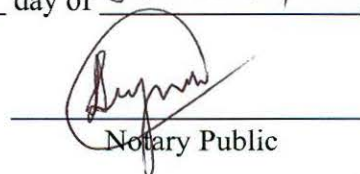


Signature of Registrant (or, if not an individual, an authorized officer or agent\* of registrant must sign).

\*The lobbyist retained by contract to provide lobbying services may not sign on behalf of the compensating registrant.

Subscribed and sworn to before me on this 10<sup>th</sup> day of JANUARY, 2013

My commission Expires: MARCH 31, 2015

  
Notary Public



Aaron Reynold W Jakulla  
District of Columbia, Notary Public  
My Commission Expires  
March 31, 2015