	VERNMENT OF THE F ETHICS AND GOVE WASHINGTO	ERNMENT ACCOUN	
📕 Original	LOBBYIST ACTI	VITY REPORT *	
Amendment	(See next page f	or instructions) ID#	
Type of Report: Ja	• •	• • •	please indicate whether you lendar year. <b>Yes No</b>
1. (a) Registrant's Name Council,	Baradel, Kosmerl & N	Iolan, P.A. (b)	Daytime Phone Number
(c) Permanent Address 125 Wes	t Street, Fourth Floor	r, Annapolis, MD 21	401 410-268-6600
	(Street Address)		(City, State, Zip Code)
(d)	Temporary	Address	(while lobbying)
2. Lobbyist (s) Working for Registrant: A (a) Name Susan T. Ford	(Street Address) ttach a Supplemental Sheet if add	-	(City, State, Zip Code)
Address 125 West Street	Fourth Floor		
<sup>(Street Addr</sup> Annapolis, MD 21401	ess)		(Street Address)
(City, State,		••••••	(City, State, Zip Code)
Daytime Phone Number 410-268 3. Person Compensating Registrant		Daytime Phone Number	
(a) Name First American Title	Insurance Company	(b) Daytime Phone Number _	703-480-9514
/ tdule35	ve, Suite 250, Chant	illy, VA 20151	
(Street Add) (d) Nature of Business title insura			(City, State, Zip Code)
4. Terms of Compensation: (a) 240 C	0/hour	(b) 2-5 years	
	Salary		Duration of Employment
5. Identify matter(s) by subject and for space is needed.	nal designation on which the lob	obyist/registrant expects to lobb	by. Attach a Supplemental Sheet if additional
Bill No. 19-634, Committe	e of Finance & Reve	nue, 8th Street Plaz	a Association, Inc.
Clarification Act of 2011.			
-			
* REMINDER _ Each new or previ	ausly registered Labbyist m	ust file a Lobbyist Registra	tion Form by January 15 <sup>th</sup> of each year

REMINI st file a Lobbyist Regi stration Form January 15 ear. w oi a Lobdy siy Jy ŀ ٦ĕ

#### Rev. 12/2012

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 Ruth Werner, Legislative Assistant, Committee on Finance and Revenue	Date 10/15/2012
Name	Date
(Schedule B) 12. Total of other expenditures related to lobbying activities:	paid to others: \$

# BOARD OF ELECTIONS AND GOVERNMENT ACCOUNTABILITY LOBBYIST/EMPLOYEE LOBBYIST'S ACTIVITY REPORT PAGE <u>3</u> OF <u>3</u> SCHEDULE A – COMPENSATION/RECEIPTS PAID TO THE LOBBYIST FOR LOBBYING:

YEAR: 2	012
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Type of Report:

January 2013 July

Period Covering: 7/1/2012

\_\_\_\_\_\_ through \_\_\_\_\_\_\_\_

LOBBYIST/EMPLOYEE LOBBYIST'S NAME: Susan T. Ford

	TION/RECEIPT LARS)	'S PAI	D FOR LOB	BYING (AMOUN	TS MAY BE ROU	NDED OFF TO WHOLE	
EMP (FEES/COMPENS	LOYER'S NAME Sation)	, ADD	RESS AND	TELEPHONE N	UMBER	TOTAL THIS PERIOD	CUMULATIVE TOTAL (FEES/COMPENSATION)
First American T 14150 Newbrok Chantilly, VA 20 703-480-9514	Fitle Insurance Corr Drive, Suite 250 0151	ipany				48.00	
<u>fees/retainer</u> \$	COMPENSATION \$		· · · · · · · · · · · · · · · · · · ·			\$	\$
EMP (FEES/COMPENS	LOYER'S NAME SATION)	, ADD	RESS AND	TELEPHONE N	UMBER	TOTAL THIS PERIOD	CUMULATIVE TOTAL (FEES/COMPENSATION)
FEES/RETAINER	COMPENSATION					_	
\$	\$					\$	\$
EMP (FEES/COMPENS	LOYER'S NAME SATION)	, ADD	RESS AND	TELEPHONE N	UMBER	TOTAL THIS PERIOD	CUMULATIVE TOTAL (FEES/COMPENSATION)
	1			1		_	
FEES/RETAINER \$	COMPENSATION \$						\$
	PLOYER'S NAMI	E, ADE	RESS AND	TELEPHONE I	NUMBER	TOTAL THIS PERIOD	CUMULATIVE TOTAL (FEES/COMPENSATION)
(FEES/COMPENS	SATION)						-
	· · · · · · · · · · · · · · · · · · ·			r	······································	_	
FEES/RETAINER \$	COMPENSATION \$					\$	\$
				RECEIVED FOR RWARD TO LIN		<sub>\$</sub> 48.00	<sub>\$</sub> 1,608.00
\$	\$ TO	RRY	TOTAL FO	RWARD TO LIN	NE 7)	\$ <sub>\$</sub> 48.00	\$ <sub>\$</sub> 1,608.00

(SEE NEXT PAGE FOR INSTRUCTIONS)

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

**YEAR:** <sup>2012</sup>

□July\_

Type of Report: January 2013 Period Covering: 7/1/2012

through <u>12/31/2012</u>

LOBBYIST/EMPLOYEE LOBBYIST'S

NAME: Susan T. Ford

OTHER COMPENS REGISTRANT FOR						AND/OR LOBBYIS	ST EMPLOYEE A	AND PAID BY THE	COMPENSATING
EMPLOYER'S NA								TOTAL THIS PERIOD	CUMULATIVE TOTAL
								N/A	N/A
OFFICE EXPENSES	ADVERTISING & PUBLICATION EX			PERSONAL EXPENSES	TRAVEL EXPENSES	COMPENSATION TO OTHER	OTHER EXPENSES	1	
\$	\$		\$		\$	\$	5	\$	\$
EMPLOYER'S	5 NAME, ADDRE	SS,	AN	D TELEPHO	ONE NUMBEI	R		TOTAL THIS PERIOD	CUMULATIVE TOTAL
OFFICE EXPENSES	ADVERTISING & PUBLICATION EX			PERSONAL EXPENSES	TRAVEL EXPENSES	COMPENSATION TO OTHER	OTHER EXPENSES		
\$	\$		\$		\$	\$	S	<u>s</u>	\$
EMPLOYER'S	5 NAME, ADDRE	SS,	AN	D TELEPHO	ONE NUMBEI	R		TOTAL THIS PERIOD	CUMULATIVE TOTAL
OFFICE EXPENSES	ADVERTISING & PUBLICATION EX			PERSONAL EXPENSES	TRAVEL EXPENSES	COMPENSATION TO OTHER	OTHER EXPENSES		
\$	\$		\$		\$	\$	S	\$	\$
EMPLOYER'S	NAME, ADDRES	5 <b>5</b> ,	ANI	D TELEPHO	NE NUMBER	t		TOTAL THIS PERIOD	CUMULATIVE TOTAL
OFFICE EXPENSES	ADVERTISING & PUBLICATION EX			PERSONAL EXPENSES	TRAVEL EXPENSES	COMPENSATION TO OTHER	OTHER EXPENSES		
\$	\$		\$		\$	5	S	\$	\$
ΤΟΤΑ					ECEIPTS RE WARD TO I	CEIVED FOR LO LINE 8)	OBBYING	\$	\$N/A
IF MORE S (SEE NEX REV. 12/2012		, CI	HEC	K BOX AND A		LEMENTAL SHEET	A-1	BE	GA Form

# **BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY** LOBBYIST/EMPLOYEE LOBBYIST'S ACTIVITY REPORT PAGE 5 OF %SCHEDULE A-2 LOANS RECEIVED BY THE LOBBYIST

YEAR	2012

			YEA	<b>R:</b>		
		Type of R	eport: <u> </u>	y <u>2013</u>	July	
		Period Cover	ing: 7/1/2012	through	12/31/2012	
	IST/EMPLOYI Susan T. Ford	EE LOBBYIST				
LOANS	S RECEIVED	IN CONNECTION	WITH LOBBYING AC		4	
 E	MPLOYER'S	NAME, ADDRESS	AND TELEPHONE NU	MBER	TOTAL LOANS THIS PERIOD TOTAL	CUMULATIVE LOAN
	<u></u>			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	N/A	
LOAN\$	\$	<u> </u>	\$			6
	<u>.</u>	I'	3 AND TELEPHONE NU	MBER	TOTAL LOANS THIS PERIOD	© CUMULATIVE LOAN TOTAL
<u>LOAN</u> \$	\$	\$	\$		\$	5
E	EMPLOYER'S	NAME, ADDRESS	AND TELEPHONE NU	MBER	TOTAL LOANS THIS PERIOD	CUMULATIVE LOAN TOTAL
LOAN\$	\$	\$	\$		\$	\$
EI TOTAL	MPLOYER'S N	NAME, ADDRESS A	ND TELEPHONE NUN	1BER	TOTAL LOANS THIS PERIOD	CUMULATIVE LOAN
LOAN	<u>م</u>	¢				
\$	\$	\$	\$		<u>р</u>	P
			IVED FOR THE PEI RWARD TO LINE 9)	RIOD		
					\$	₿.

**IF MORE SPACE IS NEEDED, CHECK BOX AND ATTACH SUPPLEMENTAL SHEET** (SEE REVERSE SIDE FOR INSTRUCTIONS) **REV. 12/2012** 

**BEGA Form** 

N/A

### **BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY** COMPENSATING REGISTRANT'S ACTIVITY REPORT PAGE & OF र्र SCHEDULE B - EXPENDITURES PAID BY COMPENSATING REGISTRANT TO THE LOBBYIST

VE	Δ	R٠	2012
1 15.	~	1.	2012

January 2013 **Type of Report:** 

July

Period Covering: 7/1/2012

\_\_\_\_\_ through \_12/31/2012

COMPENSATING REGISTRANT'S NAME: First American Title Insurance Company

PAYMENTS MADE IN CONNECTION WITH LOBBYING ACTIVITIES N/A

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
			<sub>s</sub> N/A	<sub>s</sub> N/A
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
	TOTAL EXPENDITURES	PAID FOR LOBBYING	s s	\$\$

#### TOTAL EXPENDITURES PAID FOR LOBBYING (CARRY TOTAL FORWARD TO LINE 11)

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

**REV. 12/2012** 

**BEGA** Form

#### **BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY** PAGE OF 8 LOBBYIST/COMPENSATING REGISTRANT'S ACTIVITY REPORT SCHEDULE B-1 -- OTHER EXPENDITURES

**YEAR:** 2012

January 2013 Type of Report:

July

Period Covering: 7/1/2012

\_\_\_\_\_through 12/31/2012

COMPENSATING REGISTRANT'S NAME, First American Title Insurance Company

OTHER ACTIVITY EXPENSES INCURRED, OR PAID BY THE COMPENSATING REGISTRANT TO THE LOBBYIST AND/OR IN-HOUSE EMPLOYEE LOBBYIST FOR ACTIVITES RELATIVE TO LOBBYING ACTIVITIES IN THE DISTRICT. TYPE OF COMPENSATION PAID (LOANS, CONTRIBUTION, GIFT, TOTAL DATE NAME OF RECIPIENT DESCRIPTION OF CONSIDERATION HONORARIA, ETC.) PAYMEN <sub>∞</sub>N/A \$ N/A TOTAL OTHEREXPENDITURES 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

REV. 129/2012

**BEGA** Form

		<
	BOARD OF ET GOVERNI ACCOUNTA	MENT
	LOBBYIST ACTI SCHEDUI (See next page fo	LEC    YEAR    2012
e of Report X	January <u>2013</u>	-
7	14/0040 40/0	
ering Period	/1/2012 <sub>through</sub> _12/3	1/2012
	/1/2012 <sub>through</sub> _12/3 Sating's registrant's n	Council, Baradet, Kosmeri & Nolan, P.A. and Susan T. Ford
		Council, Baradet, Kosmerl & Nolan, P.A. and Susan T. Ford
BBYIST/COMPENS	SATING'S REGISTRANT'S N.	AME:
BBYIST/COMPENS	SATING'S REGISTRANT'S N.	AME:
BBYIST/COMPENS	SATING'S REGISTRANT'S N.	AME:
BBYIST/COMPENS	SATING'S REGISTRANT'S N.	AME:
BBYIST/COMPENS	SATING'S REGISTRANT'S N.	AME:

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).

12/15/2010

\*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 2013

My commission Expires:

day of

<u>anuary</u>, 5 Martone

Notary Public



**REV 7/2000** 

**OCF FORM 26**