

LOBBY REGISTRATION AMENDMENT

FORM AREG
COVER SHEET PG 1

<p>The FORM AREG INSTRUCTION GUIDE explains how to complete this form.</p>	<p>1 NUMBER OF SCHEDULES filed: A <u>18</u> B <u>0</u></p>	<p>Filer ID 00060628</p> <p>Page # 1 of 76</p>				
<p>2 REGISTRATION FEE ENCLOSED</p>	<p>(SEE INSTRUCTION GUIDE TO DETERMINE YOUR FEE)</p> <p><input checked="" type="checkbox"/> \$750 REGULAR <input type="checkbox"/> \$150 Non-Profit (Proof Required)</p>	<p>OFFICE USE ONLY</p> <p>Date Received ELECTRONICALLY FILED 08/04/2022</p> <p>Date Hand-delivered or Date Postmarked</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">Receipt #</td> <td style="width:50%;">Amount</td> </tr> <tr> <td> </td> <td> </td> </tr> </table> <p>Date Processed</p> <p>Date Imaged</p>	Receipt #	Amount		
Receipt #	Amount					
<p>3 REPORT SCHEDULE</p>	<p><input type="checkbox"/> MODIFIED (ANNUAL) <input checked="" type="checkbox"/> REGULAR (MONTHLY)</p>					
<p>4 REGISTRANT NAME</p>	<p>Ms. Cathy S. DeWitt</p>					
<p>5 IS THE REGISTRANT AN ENTITY?</p>	<p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p>					
<p>6 REGISTRANT'S NORMAL BUSINESS</p>	<p>Consultant</p>					
<p>7 REGISTRANT'S BUSINESS ADDRESS</p>	<p>(ADDRESS / PO BOX; APT/SUITE #; CITY; STATE; ZIP CODE)</p> <p>P. O. Box 2227</p> <p>Austin, TX 78768</p>					
<p>8 REGISTRANT'S MAILING ADDRESS</p> <p><input type="checkbox"/> same as business address listed above</p>	<p>(ADDRESS / PO BOX; APT/SUITE #; CITY; STATE; ZIP CODE)</p> <p>P. O. Box 2227</p> <p>Austin, TX 78768</p>					
<p>9 BUSINESS PHONE</p>	<p>(AREA CODE) NUMBER: EXTENSION)</p> <p>(512) 477-5200</p>					
<p>10 IS THE REGISTRANT A LOBBY FIRM EMPLOYEE?</p>	<p><input type="checkbox"/> YES NAME OF FIRM _____</p> <p><input checked="" type="checkbox"/> NO ADDRESS OF FIRM _____</p> <p>PHONE NO. OF FIRM _____</p>					
<p>11 PERSON(S) PROVIDING COMPENSATION AND/OR REIMBURSEMENT FROM POLITICAL FUNDS</p> <p>(list name and address of each person)</p> <p><input type="checkbox"/> additional pages</p>	<p>(NAME OF INDIVIDUAL OR ENTITY)</p> <p>N/A</p> <p>(ADDRESS / PO BOX; APT/SUITE #; CITY; STATE; ZIP CODE)</p>					
<p>12 FARA REGISTRATION</p>	<p>I am not currently registered under FARA and am not currently required to be registered under FARA.</p>					

CHANGES IN INFORMATION. If any of the information provided in this registration changes (other than information requested on PART 3(a) or 3(b) of SCHEDULE A), you must file a LOBBY REGISTRATION AMENDMENT (FORM AREG) showing the changed information by the 10th day of the month following the month the information changed (unless you report the changed information on a timely filed monthly activities report (FORM LA)).

REGISTRANT NAME: DeWitt, Cathy S. (Ms.)

Filer ID

00060628

Page # 2 of 76

13 SUBJECT MATTER CATEGORIES

- | | | |
|---------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|-----------------------------------------------------------------------------|
| <input type="checkbox"/> 1 abortion | <input type="checkbox"/> 29 education | <input checked="" type="checkbox"/> 57 occupational regulation |
| <input type="checkbox"/> 2 aeronautics | <input type="checkbox"/> 30 elections | <input type="checkbox"/> 58 oil & gas |
| <input type="checkbox"/> 3 aging | <input type="checkbox"/> 31 energy | <input type="checkbox"/> 59 open records & open meetings |
| <input type="checkbox"/> 4 agriculture | <input checked="" type="checkbox"/> 32 environment | <input type="checkbox"/> 60 parks & wildlife |
| <input type="checkbox"/> 5 alcoholic beverage regulation | <input type="checkbox"/> 33 ethics | <input type="checkbox"/> 61 political subdivisions |
| <input type="checkbox"/> 6 alcoholism & drug abuse | <input checked="" type="checkbox"/> 34 family issues | <input type="checkbox"/> 62 probate |
| <input type="checkbox"/> 7 aliens | <input checked="" type="checkbox"/> 35 fees & other non-tax revenue | <input checked="" type="checkbox"/> 63 product liability |
| <input checked="" type="checkbox"/> 8 amusements, games, sports | <input checked="" type="checkbox"/> 36 financial institutions | <input type="checkbox"/> 64 property interests |
| <input type="checkbox"/> 9 animals | <input checked="" type="checkbox"/> 37 fire fighters & police | <input type="checkbox"/> 65 public lands |
| <input type="checkbox"/> 10 arts & humanities | <input type="checkbox"/> 38 gambling | <input type="checkbox"/> 66 purchasing |
| <input checked="" type="checkbox"/> 11 business & commerce | <input type="checkbox"/> 39 handicapped persons | <input type="checkbox"/> 67 redistricting |
| <input type="checkbox"/> 12 cemeteries | <input checked="" type="checkbox"/> 40 health & health care | <input type="checkbox"/> 68 religion |
| <input type="checkbox"/> 13 charitable & nonprofit organizations | <input type="checkbox"/> 41 highways & roads | <input type="checkbox"/> 69 retirement systems |
| <input checked="" type="checkbox"/> 14 city government | <input type="checkbox"/> 42 historic preservation & museums | <input checked="" type="checkbox"/> 70 safety |
| <input checked="" type="checkbox"/> 15 civil remedies & liabilities | <input checked="" type="checkbox"/> 43 hospitals | <input checked="" type="checkbox"/> 71 special districts & authorities |
| <input type="checkbox"/> 16 coastal affairs & beaches | <input type="checkbox"/> 44 housing | <input checked="" type="checkbox"/> 72 state agencies, boards & commissions |
| <input checked="" type="checkbox"/> 17 common carriers | <input checked="" type="checkbox"/> 45 human services | <input type="checkbox"/> 73 state employees, officers & symbols |
| <input type="checkbox"/> 18 communication & press | <input checked="" type="checkbox"/> 46 insurance | <input checked="" type="checkbox"/> 74 state finances |
| <input checked="" type="checkbox"/> 19 consumer protection | <input checked="" type="checkbox"/> 47 labor | <input checked="" type="checkbox"/> 75 taxation |
| <input checked="" type="checkbox"/> 20 corporations & associations | <input type="checkbox"/> 48 law enforcement | <input checked="" type="checkbox"/> 76 tort reform |
| <input type="checkbox"/> 21 corrections | <input type="checkbox"/> 49 lawyers | <input type="checkbox"/> 77 tourism |
| <input checked="" type="checkbox"/> 22 county government | <input type="checkbox"/> 50 libraries | <input checked="" type="checkbox"/> 78 transportation |
| <input type="checkbox"/> 23 courts | <input type="checkbox"/> 51 malpractice-health care providers | <input type="checkbox"/> 79 utilities |
| <input type="checkbox"/> 24 crime | <input type="checkbox"/> 52 mental health & cognition | <input type="checkbox"/> 80 vehicles & traffic |
| <input type="checkbox"/> 25 criminal procedures | <input checked="" type="checkbox"/> 53 military & veterans | <input checked="" type="checkbox"/> 81 water |
| <input type="checkbox"/> 26 day care | <input type="checkbox"/> 54 mines & mineral resources | <input type="checkbox"/> 82 weapons |
| <input type="checkbox"/> 27 disaster preparedness & relief | <input checked="" type="checkbox"/> 55 minors | <input type="checkbox"/> 83 women's issues |
| <input checked="" type="checkbox"/> 28 economic & industrial development | <input checked="" type="checkbox"/> 56 nursing homes | |
| <input checked="" type="checkbox"/> 84 OTHER Fireworks, technology, Databases; Medical Waste, Consumer Drones | | |

14 DOCKET NOS. OR OTHER DESIGNATION

- not applicable
- additional pages

DESIGNATION	AGENCY
DESIGNATION	AGENCY
DESIGNATION	AGENCY

15 SIGNATURE

To the best of my knowledge the accompanying document is true and correct and includes all information to be report by me under chapter 305, GovernmentCode.

I further affirm that, to the best of my knowledge, I have complied with Section 305.028, Government Code (Prohibited Conflicts of Interest). (See instructions for the text of Section 305.028.)

I further affirm that, if I selected the Non-Profit registration level, to the best of my knowledge, I have listed only Employers/Clients that qualify as exempt from federal income tax under Section 501(c)(3), 501(c)(4), or 501(c)(6), Internal Revenue Code of 1986.

AFFIX NOTARY STAMP / SEAL ABOVE

Ms. Cathy S. DeWitt

Signature of Registrant

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____ to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

**AMENDMENT: EMPLOYER / CLIENT
PART 1 - GENERAL INFORMATION**

**FORM AREG
SCHEDULE A PG 1**

Use the Form AREG Instruction Guide for assistance in filling out Schedule A Part 1.

1 PAGE #
Sch: 1/1 Rpt: 3/76

2 REGISTRANT NAME	DeWitt, Cathy S. (Ms.)				
3 EMPLOYER / CLIENT NAME	Altria Client Svcs & Affiliates-Philip Morris USA, John Middleton, USSTC & Helix Innov.				
4 EMPLOYER / CLIENT MAILING ADDRESS	ADDRESS / P.O. BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE
	1005 Congress Avenue Suite 850 Austin, TX 78701				

PART 2 - COMPENSATION

1 LEVEL OF COMPENSATION FOR LOBBYING	At least \$18,890 but less than \$47,219.99				
2 TYPE OF COMPENSATION BEING REPORTED	<input type="checkbox"/> PAID	<input type="checkbox"/> EARNED (but not received)	<input checked="" type="checkbox"/> PROSPECTIVE		
3 INDIVIDUAL REPORTING COMPENSATION AND/OR REIMBURSEMENT FOR ENTITY	<input type="checkbox"/> YES	NAME OF ENTITY	_____		
		ADDRESS OF ENTITY	_____		
	<input checked="" type="checkbox"/> NO	PHONE NO. OF ENTITY	_____		

PART 3 - ORGANIZATIONAL INFORMATION

1 IS THE EMPLOYER/CLIENT AN ENTITY OR AN INDIVIDUAL?	<input checked="" type="checkbox"/> ENTITY	<input type="checkbox"/> INDIVIDUAL (Complete PART 4 of SCHEDULE A)
2 IS THE EMPLOYER/CLIENT A CORPORATION?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO (Complete PART 3(a) of SCHEDULE A)
3 ARE THE SHARES OF THE CORPORATION PUBLICLY TRADED?	<input checked="" type="checkbox"/> YES (Complete PART 4 of SCHEDULE A)	<input type="checkbox"/> NO (Complete PART 3(b) of SCHEDULE A)
4 IS THE CLIENT A STATE AGENCY THAT PAYS YOU A SALES COMMISSION OR SUCH FEE?	<input type="checkbox"/> YES (Complete PART 5 of SCHEDULE A)	<input checked="" type="checkbox"/> NO

AMENDMENT: EMPLOYER / CLIENT
Part 4 - LOBBYING SUBJECT MATTER

FORM AREG
SCHEDULE A PG 4

Use the FORM AREG INSTRUCTION GUIDE for assistance in filling out this form

Page #
 Sch: 1/1 Rpt: 4/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 Altria Client Svcs & Affiliates-Philip Morris USA, John Middleton,
 USSTC & Helix Innov.

1 SUBJECT MATTER

SUBJECT MATTER CATEGORIES

- | | | |
|------------------------------------------------------------------|---------------------------------------------------------------|------------------------------------------------------------------|
| <input type="checkbox"/> 1 abortion | <input type="checkbox"/> 29 education | <input type="checkbox"/> 57 occupational regulation |
| <input type="checkbox"/> 2 aeronautics | <input type="checkbox"/> 30 elections | <input type="checkbox"/> 58 oil & gas |
| <input type="checkbox"/> 3 aging | <input type="checkbox"/> 31 energy | <input type="checkbox"/> 59 open records & open meetings |
| <input type="checkbox"/> 4 agriculture | <input checked="" type="checkbox"/> 32 environment | <input type="checkbox"/> 60 parks & wildlife |
| <input type="checkbox"/> 5 alcoholic beverage regulation | <input type="checkbox"/> 33 ethics | <input type="checkbox"/> 61 political subdivisions |
| <input type="checkbox"/> 6 alcoholism & drug abuse | <input type="checkbox"/> 34 family issues | <input type="checkbox"/> 62 probate |
| <input type="checkbox"/> 7 aliens | <input type="checkbox"/> 35 fees & other non-tax revenue | <input checked="" type="checkbox"/> 63 product liability |
| <input type="checkbox"/> 8 amusements, games, sports | <input type="checkbox"/> 36 financial institutions | <input type="checkbox"/> 64 property interests |
| <input type="checkbox"/> 9 animals | <input type="checkbox"/> 37 fire fighters & police | <input type="checkbox"/> 65 public lands |
| <input type="checkbox"/> 10 arts & humanities | <input type="checkbox"/> 38 gambling | <input type="checkbox"/> 66 purchasing |
| <input type="checkbox"/> 11 business & commerce | <input type="checkbox"/> 39 handicapped persons | <input type="checkbox"/> 67 redistricting |
| <input type="checkbox"/> 12 cemeteries | <input checked="" type="checkbox"/> 40 health & health care | <input type="checkbox"/> 68 religion |
| <input type="checkbox"/> 13 charitable & nonprofit organizations | <input type="checkbox"/> 41 highways & roads | <input type="checkbox"/> 69 retirement systems |
| <input type="checkbox"/> 14 city government | <input type="checkbox"/> 42 historic preservation & museums | <input type="checkbox"/> 70 safety |
| <input type="checkbox"/> 15 civil remedies & liabilities | <input type="checkbox"/> 43 hospitals | <input type="checkbox"/> 71 special districts & authorities |
| <input type="checkbox"/> 16 coastal affairs & beaches | <input type="checkbox"/> 44 housing | <input type="checkbox"/> 72 state agencies, boards & commissions |
| <input type="checkbox"/> 17 common carriers | <input type="checkbox"/> 45 human services | <input type="checkbox"/> 73 state employees, officers & symbols |
| <input type="checkbox"/> 18 communication & press | <input type="checkbox"/> 46 insurance | <input type="checkbox"/> 74 state finances |
| <input type="checkbox"/> 19 consumer protection | <input type="checkbox"/> 47 labor | <input checked="" type="checkbox"/> 75 taxation |
| <input type="checkbox"/> 20 corporations & associations | <input type="checkbox"/> 48 law enforcement | <input type="checkbox"/> 76 tort reform |
| <input type="checkbox"/> 21 corrections | <input type="checkbox"/> 49 lawyers | <input type="checkbox"/> 77 tourism |
| <input type="checkbox"/> 22 county government | <input type="checkbox"/> 50 libraries | <input type="checkbox"/> 78 transportation |
| <input type="checkbox"/> 23 courts | <input type="checkbox"/> 51 malpractice-health care providers | <input type="checkbox"/> 79 utilities |
| <input type="checkbox"/> 24 crime | <input type="checkbox"/> 52 mental health & cognition | <input type="checkbox"/> 80 vehicles & traffic |
| <input type="checkbox"/> 25 criminal procedures | <input type="checkbox"/> 53 military & veterans | <input type="checkbox"/> 81 water |
| <input type="checkbox"/> 26 day care | <input type="checkbox"/> 54 mines & mineral resources | <input type="checkbox"/> 82 weapons |
| <input type="checkbox"/> 27 disaster preparedness & relief | <input type="checkbox"/> 55 minors | <input type="checkbox"/> 83 women's issues |
| <input type="checkbox"/> 28 economic & industrial development | <input type="checkbox"/> 56 nursing homes | |
| <input type="checkbox"/> 84 OTHER | | |

13 DOCKET NOS. OR OTHER DESIGNATION

- not applicable
 additional pages

DESIGNATION	AGENCY
DESIGNATION	AGENCY
DESIGNATION	AGENCY

GO TO SCHEDULE B

**AMENDMENT: EMPLOYER / CLIENT
PART 1 - GENERAL INFORMATION**

**FORM AREG
SCHEDULE A PG 1**

Use the Form AREG Instruction Guide for assistance in filling out Schedule A Part 1.

1 PAGE #
Sch: 1/1 Rpt: 5/76

2 REGISTRANT NAME	DeWitt, Cathy S. (Ms.)				
3 EMPLOYER / CLIENT NAME	AmplioSpeech, Inc.				
4 EMPLOYER / CLIENT MAILING ADDRESS	ADDRESS / P.O. BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE
	1303 San Antonio Street Suite 720 Austin, TX 78701				

PART 2 - COMPENSATION

1 LEVEL OF COMPENSATION FOR LOBBYING	At least \$47,220 but less than \$94,439.99				
2 TYPE OF COMPENSATION BEING REPORTED	<input type="checkbox"/> PAID	<input type="checkbox"/> EARNED (but not received)	<input checked="" type="checkbox"/> PROSPECTIVE		
3 INDIVIDUAL REPORTING COMPENSATION AND/OR REIMBURSEMENT FOR ENTITY	<input type="checkbox"/> YES	NAME OF ENTITY	_____		
		ADDRESS OF ENTITY	_____		
	<input checked="" type="checkbox"/> NO	PHONE NO. OF ENTITY	_____		

PART 3 - ORGANIZATIONAL INFORMATION

1 IS THE EMPLOYER/CLIENT AN ENTITY OR AN INDIVIDUAL?	<input checked="" type="checkbox"/> ENTITY	<input type="checkbox"/> INDIVIDUAL (Complete PART 4 of SCHEDULE A)
2 IS THE EMPLOYER/CLIENT A CORPORATION?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO (Complete PART 3(a) of SCHEDULE A)
3 ARE THE SHARES OF THE CORPORATION PUBLICLY TRADED?	<input type="checkbox"/> YES (Complete PART 4 of SCHEDULE A)	<input checked="" type="checkbox"/> NO (Complete PART 3(b) of SCHEDULE A)
4 IS THE CLIENT A STATE AGENCY THAT PAYS YOU A SALES COMMISSION OR SUCH FEE?	<input type="checkbox"/> YES (Complete PART 5 of SCHEDULE A)	<input checked="" type="checkbox"/> NO

AMENDMENT: EMPLOYER / CLIENT
Part 3(b) - CORPORATION NOT PUBLICLY TRADED

FORM AREG
SCHEDULE A PG 3

Complete PART 3(b) only if the employer/client covered by this SCHEDULE A is a corporation whose shares are not publicly traded. Attach additional copies of this form as needed.

PAGE #
 Sch: 1/3 Rpt: 6/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 AmplioSpeech, Inc.

1 CORPORATE SHAREHOLDERS

NUMBER OF SHAREHOLDERS
N/A

2 CORPORATE OFFICERS AND BOARD MEMBERS

LAST; SUFFIX; FIRST; TITLE
 Atias, Iian

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 1303 San Antonio Street
 Suite 720
 Austin, TX 78701

additional pages

LAST; SUFFIX; FIRST; TITLE
 Bishop, Rebecca

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 1303 San Antonio Street
 Suite 720
 Austin, TX 78701

LAST; SUFFIX; FIRST; TITLE
 Dilanian, Jack

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 1303 San Antonio Street
 Suite 720
 Austin, TX 78701

LAST; SUFFIX; FIRST; TITLE
 Katz-Francois, Mikhail

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 1303 San Antonio Street
 Suite 720
 Austin, TX 78701

3 CORPORATE OWNERSHIP/ HOLDINGS

LAST; SUFFIX; FIRST; TITLE

PERSONS OWNING 10% OR MORE SHARES

LAST; SUFFIX; FIRST; TITLE

LAST; SUFFIX; FIRST; TITLE

not applicable

LAST; SUFFIX; FIRST; TITLE

additional pages

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 3(b) - CORPORATION NOT PUBLICLY TRADED

FORM AREG
SCHEDULE A PG 3

Complete PART 3(b) only if the employer/client covered by this SCHEDULE A is a corporation whose shares are not publicly traded. Attach additional copies of this form as needed.

PAGE #
 Sch: 2/3 Rpt: 7/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 AmplioSpeech, Inc.

1 CORPORATE SHAREHOLDERS	NUMBER OF SHAREHOLDERS N/A
2 CORPORATE OFFICERS AND BOARD MEMBERS <input checked="" type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE Medan, Yoav (Dr.)
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1303 San Antonio Street Suite 720 Austin, TX 78701
	LAST; SUFFIX; FIRST; TITLE Moshkovitz, Zvi
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1303 San Antonio Street Suite 720 Austin, TX 78701
	LAST; SUFFIX; FIRST; TITLE O'Keefe, Conner
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1303 San Antonio Street Suite 720 Austin, TX 78701
	LAST; SUFFIX; FIRST; TITLE Raichel, Eran
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1303 San Antonio Street Suite 720 Austin, TX 78701
3 CORPORATE OWNERSHIP/ HOLDINGS PERSONS OWNING 10% OR MORE SHARES <input checked="" type="checkbox"/> not applicable <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 3(b) - CORPORATION NOT PUBLICLY TRADED

FORM AREG
SCHEDULE A PG 3

Complete PART 3(b) only if the employer/client covered by this SCHEDULE A is a corporation whose shares are not publicly traded. Attach additional copies of this form as needed.

PAGE #
 Sch: 3/3 Rpt: 8/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 AmplioSpeech, Inc.

1 CORPORATE SHAREHOLDERS

NUMBER OF SHAREHOLDERS
N/A

2 CORPORATE OFFICERS AND BOARD MEMBERS

LAST; SUFFIX; FIRST; TITLE
 Serfaty, Daniel (Dr.)

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 1303 San Antonio Street
 Suite 720
 Austin, TX 78701

additional pages

LAST; SUFFIX; FIRST; TITLE
 Shapira, Yair (Dr.)

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 1303 San Antonio Street
 Suite 720
 Austin, TX 78701

LAST; SUFFIX; FIRST; TITLE
 Volosov, Paul (Dr.)

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 1303 San Antonio Street
 Suite 720
 Austin, TX 78701

LAST; SUFFIX; FIRST; TITLE
 Whitmire, Kathleen (Dr.)

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 1303 San Antonio Street
 Suite 720
 Austin, TX 78701

3 CORPORATE OWNERSHIP/ HOLDINGS

LAST; SUFFIX; FIRST; TITLE

PERSONS OWNING 10% OR MORE SHARES

LAST; SUFFIX; FIRST; TITLE

LAST; SUFFIX; FIRST; TITLE

not applicable

LAST; SUFFIX; FIRST; TITLE

additional pages

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 4 - LOBBYING SUBJECT MATTER

FORM AREG
SCHEDULE A PG 4

Use the FORM AREG INSTRUCTION GUIDE for assistance in filling out this form

Page #
 Sch: 1/1 Rpt: 9/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 AmplioSpeech, Inc.

1 SUBJECT MATTER

SUBJECT MATTER CATEGORIES

- | | | |
|------------------------------------------------------------------|---------------------------------------------------------------|-----------------------------------------------------------------------------|
| <input type="checkbox"/> 1 abortion | <input checked="" type="checkbox"/> 29 education | <input checked="" type="checkbox"/> 57 occupational regulation |
| <input type="checkbox"/> 2 aeronautics | <input type="checkbox"/> 30 elections | <input type="checkbox"/> 58 oil & gas |
| <input type="checkbox"/> 3 aging | <input type="checkbox"/> 31 energy | <input type="checkbox"/> 59 open records & open meetings |
| <input type="checkbox"/> 4 agriculture | <input type="checkbox"/> 32 environment | <input type="checkbox"/> 60 parks & wildlife |
| <input type="checkbox"/> 5 alcoholic beverage regulation | <input type="checkbox"/> 33 ethics | <input type="checkbox"/> 61 political subdivisions |
| <input type="checkbox"/> 6 alcoholism & drug abuse | <input type="checkbox"/> 34 family issues | <input type="checkbox"/> 62 probate |
| <input type="checkbox"/> 7 aliens | <input type="checkbox"/> 35 fees & other non-tax revenue | <input type="checkbox"/> 63 product liability |
| <input type="checkbox"/> 8 amusements, games, sports | <input type="checkbox"/> 36 financial institutions | <input type="checkbox"/> 64 property interests |
| <input type="checkbox"/> 9 animals | <input type="checkbox"/> 37 fire fighters & police | <input type="checkbox"/> 65 public lands |
| <input type="checkbox"/> 10 arts & humanities | <input type="checkbox"/> 38 gambling | <input type="checkbox"/> 66 purchasing |
| <input checked="" type="checkbox"/> 11 business & commerce | <input type="checkbox"/> 39 handicapped persons | <input type="checkbox"/> 67 redistricting |
| <input type="checkbox"/> 12 cemeteries | <input type="checkbox"/> 40 health & health care | <input type="checkbox"/> 68 religion |
| <input type="checkbox"/> 13 charitable & nonprofit organizations | <input type="checkbox"/> 41 highways & roads | <input type="checkbox"/> 69 retirement systems |
| <input type="checkbox"/> 14 city government | <input type="checkbox"/> 42 historic preservation & museums | <input type="checkbox"/> 70 safety |
| <input type="checkbox"/> 15 civil remedies & liabilities | <input type="checkbox"/> 43 hospitals | <input type="checkbox"/> 71 special districts & authorities |
| <input type="checkbox"/> 16 coastal affairs & beaches | <input type="checkbox"/> 44 housing | <input checked="" type="checkbox"/> 72 state agencies, boards & commissions |
| <input type="checkbox"/> 17 common carriers | <input type="checkbox"/> 45 human services | <input type="checkbox"/> 73 state employees, officers & symbols |
| <input type="checkbox"/> 18 communication & press | <input type="checkbox"/> 46 insurance | <input type="checkbox"/> 74 state finances |
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| <input type="checkbox"/> 21 corrections | <input type="checkbox"/> 49 lawyers | <input type="checkbox"/> 77 tourism |
| <input type="checkbox"/> 22 county government | <input type="checkbox"/> 50 libraries | <input type="checkbox"/> 78 transportation |
| <input type="checkbox"/> 23 courts | <input type="checkbox"/> 51 malpractice-health care providers | <input type="checkbox"/> 79 utilities |
| <input type="checkbox"/> 24 crime | <input type="checkbox"/> 52 mental health & cognition | <input type="checkbox"/> 80 vehicles & traffic |
| <input type="checkbox"/> 25 criminal procedures | <input type="checkbox"/> 53 military & veterans | <input type="checkbox"/> 81 water |
| <input type="checkbox"/> 26 day care | <input type="checkbox"/> 54 mines & mineral resources | <input type="checkbox"/> 82 weapons |
| <input type="checkbox"/> 27 disaster preparedness & relief | <input type="checkbox"/> 55 minors | <input type="checkbox"/> 83 women's issues |
| <input type="checkbox"/> 28 economic & industrial development | <input type="checkbox"/> 56 nursing homes | |
| <input type="checkbox"/> 84 OTHER | | |

13 DOCKET NOS. OR OTHER DESIGNATION

- not applicable
 additional pages

DESIGNATION

AGENCY

DESIGNATION

AGENCY

DESIGNATION

AGENCY

GO TO SCHEDULE B

**AMENDMENT: EMPLOYER / CLIENT
PART 1 - GENERAL INFORMATION**

**FORM AREG
SCHEDULE A PG 1**

Use the Form AREG Instruction Guide for assistance in filling out Schedule A Part 1.

1 PAGE #
Sch: 1/1 Rpt: 10/76

2 REGISTRANT NAME	DeWitt, Cathy S. (Ms.)				
3 EMPLOYER / CLIENT NAME	Austin Firefighters Association				
4 EMPLOYER / CLIENT MAILING ADDRESS	ADDRESS / P.O. BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE
	7537 Cameron Road				
	Austin, TX 78752				

PART 2 - COMPENSATION

1 LEVEL OF COMPENSATION FOR LOBBYING	Less than \$18,890				
2 TYPE OF COMPENSATION BEING REPORTED	<input type="checkbox"/> PAID	<input type="checkbox"/> EARNED (but not received)	<input checked="" type="checkbox"/> PROSPECTIVE		
3 INDIVIDUAL REPORTING COMPENSATION AND/OR REIMBURSEMENT FOR ENTITY	<input type="checkbox"/> YES	NAME OF ENTITY	_____		
		ADDRESS OF ENTITY	_____		
	<input checked="" type="checkbox"/> NO	PHONE NO. OF ENTITY	_____		

PART 3 - ORGANIZATIONAL INFORMATION

1 IS THE EMPLOYER/CLIENT AN ENTITY OR AN INDIVIDUAL?	<input checked="" type="checkbox"/> ENTITY	<input type="checkbox"/> INDIVIDUAL (Complete PART 4 of SCHEDULE A)
2 IS THE EMPLOYER/CLIENT A CORPORATION?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO (Complete PART 3(a) of SCHEDULE A)
3 ARE THE SHARES OF THE CORPORATION PUBLICLY TRADED?	<input type="checkbox"/> YES (Complete PART 4 of SCHEDULE A)	<input checked="" type="checkbox"/> NO (Complete PART 3(b) of SCHEDULE A)
4 IS THE CLIENT A STATE AGENCY THAT PAYS YOU A SALES COMMISSION OR SUCH FEE?	<input type="checkbox"/> YES (Complete PART 5 of SCHEDULE A)	<input checked="" type="checkbox"/> NO

AMENDMENT: EMPLOYER / CLIENT
Part 3(b) - CORPORATION NOT PUBLICLY TRADED

FORM AREG
SCHEDULE A PG 3

Complete PART 3(b) only if the employer/client covered by this SCHEDULE A is a corporation whose shares are not publicly traded. Attach additional copies of this form as needed.

PAGE #
 Sch: 1/3 Rpt: 11/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 Austin Firefighters Association

1 CORPORATE SHAREHOLDERS	NUMBER OF SHAREHOLDERS N/A
2 CORPORATE OFFICERS AND BOARD MEMBERS <input checked="" type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE Copus, Jeremy
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 7537 Cameron Road Austin, TX 78752
	LAST; SUFFIX; FIRST; TITLE Denzer, Randy
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 7537 Cameron Road Austin, TX 78752
	LAST; SUFFIX; FIRST; TITLE Duffee, Michael
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 7537 Cameron Road Austin, TX 78752
	LAST; SUFFIX; FIRST; TITLE Eichler, Lynn
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 7537 Cameron Road Austin, TX 78752
3 CORPORATE OWNERSHIP/ HOLDINGS PERSONS OWNING 10% OR MORE SHARES <input checked="" type="checkbox"/> not applicable <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 3(b) - CORPORATION NOT PUBLICLY TRADED

FORM AREG
SCHEDULE A PG 3

Complete PART 3(b) only if the employer/client covered by this SCHEDULE A is a corporation whose shares are not publicly traded. Attach additional copies of this form as needed.

PAGE #
 Sch: 2/3 Rpt: 12/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 Austin Firefighters Association

1 CORPORATE SHAREHOLDERS

NUMBER OF SHAREHOLDERS
N/A

2 CORPORATE OFFICERS AND BOARD MEMBERS

LAST; SUFFIX; FIRST; TITLE
 Nicks, Bob

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 7537 Cameron Road
 Austin, TX 78752

additional pages

LAST; SUFFIX; FIRST; TITLE
 Pope, Greg

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 7537 Cameron Road
 Austin, TX 78752

LAST; SUFFIX; FIRST; TITLE
 Tijerina, Robert

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 7537 Cameron Road
 Austin, TX 78752

LAST; SUFFIX; FIRST; TITLE
 Vanegas, Alex

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 7537 Cameron Road
 Austin, TX 78752

3 CORPORATE OWNERSHIP/ HOLDINGS

LAST; SUFFIX; FIRST; TITLE

PERSONS OWNING 10% OR MORE SHARES

LAST; SUFFIX; FIRST; TITLE

LAST; SUFFIX; FIRST; TITLE

not applicable

LAST; SUFFIX; FIRST; TITLE

additional pages

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 3(b) - CORPORATION NOT PUBLICLY TRADED

FORM AREG
SCHEDULE A PG 3

Complete PART 3(b) only if the employer/client covered by this SCHEDULE A is a corporation whose shares are not publicly traded. Attach additional copies of this form as needed.

PAGE #
 Sch: 3/3 Rpt: 13/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 Austin Firefighters Association

1 CORPORATE SHAREHOLDERS	NUMBER OF SHAREHOLDERS N/A
2 CORPORATE OFFICERS AND BOARD MEMBERS <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE Watson, Donnie
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 7537 Cameron Road Austin, TX 78752
	LAST; SUFFIX; FIRST; TITLE
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
	LAST; SUFFIX; FIRST; TITLE
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
	LAST; SUFFIX; FIRST; TITLE
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
3 CORPORATE OWNERSHIP/ HOLDINGS PERSONS OWNING 10% OR MORE SHARES <input checked="" type="checkbox"/> not applicable <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 4 - LOBBYING SUBJECT MATTER

FORM AREG
SCHEDULE A PG 4

Use the FORM AREG INSTRUCTION GUIDE for assistance in filling out this form

Page #
 Sch: 1/1 Rpt: 14/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 Austin Firefighters Association

1 SUBJECT MATTER

SUBJECT MATTER CATEGORIES

- | | | |
|------------------------------------------------------------------|---------------------------------------------------------------|------------------------------------------------------------------|
| <input type="checkbox"/> 1 abortion | <input type="checkbox"/> 29 education | <input type="checkbox"/> 57 occupational regulation |
| <input type="checkbox"/> 2 aeronautics | <input type="checkbox"/> 30 elections | <input type="checkbox"/> 58 oil & gas |
| <input type="checkbox"/> 3 aging | <input type="checkbox"/> 31 energy | <input type="checkbox"/> 59 open records & open meetings |
| <input type="checkbox"/> 4 agriculture | <input type="checkbox"/> 32 environment | <input type="checkbox"/> 60 parks & wildlife |
| <input type="checkbox"/> 5 alcoholic beverage regulation | <input type="checkbox"/> 33 ethics | <input type="checkbox"/> 61 political subdivisions |
| <input type="checkbox"/> 6 alcoholism & drug abuse | <input type="checkbox"/> 34 family issues | <input type="checkbox"/> 62 probate |
| <input type="checkbox"/> 7 aliens | <input type="checkbox"/> 35 fees & other non-tax revenue | <input type="checkbox"/> 63 product liability |
| <input type="checkbox"/> 8 amusements, games, sports | <input type="checkbox"/> 36 financial institutions | <input type="checkbox"/> 64 property interests |
| <input type="checkbox"/> 9 animals | <input type="checkbox"/> 37 fire fighters & police | <input type="checkbox"/> 65 public lands |
| <input type="checkbox"/> 10 arts & humanities | <input type="checkbox"/> 38 gambling | <input type="checkbox"/> 66 purchasing |
| <input checked="" type="checkbox"/> 11 business & commerce | <input type="checkbox"/> 39 handicapped persons | <input type="checkbox"/> 67 redistricting |
| <input type="checkbox"/> 12 cemeteries | <input type="checkbox"/> 40 health & health care | <input type="checkbox"/> 68 religion |
| <input type="checkbox"/> 13 charitable & nonprofit organizations | <input type="checkbox"/> 41 highways & roads | <input checked="" type="checkbox"/> 69 retirement systems |
| <input type="checkbox"/> 14 city government | <input type="checkbox"/> 42 historic preservation & museums | <input type="checkbox"/> 70 safety |
| <input type="checkbox"/> 15 civil remedies & liabilities | <input type="checkbox"/> 43 hospitals | <input type="checkbox"/> 71 special districts & authorities |
| <input type="checkbox"/> 16 coastal affairs & beaches | <input type="checkbox"/> 44 housing | <input type="checkbox"/> 72 state agencies, boards & commissions |
| <input type="checkbox"/> 17 common carriers | <input type="checkbox"/> 45 human services | <input type="checkbox"/> 73 state employees, officers & symbols |
| <input type="checkbox"/> 18 communication & press | <input type="checkbox"/> 46 insurance | <input type="checkbox"/> 74 state finances |
| <input type="checkbox"/> 19 consumer protection | <input type="checkbox"/> 47 labor | <input type="checkbox"/> 75 taxation |
| <input type="checkbox"/> 20 corporations & associations | <input type="checkbox"/> 48 law enforcement | <input type="checkbox"/> 76 tort reform |
| <input type="checkbox"/> 21 corrections | <input type="checkbox"/> 49 lawyers | <input type="checkbox"/> 77 tourism |
| <input type="checkbox"/> 22 county government | <input type="checkbox"/> 50 libraries | <input type="checkbox"/> 78 transportation |
| <input type="checkbox"/> 23 courts | <input type="checkbox"/> 51 malpractice-health care providers | <input type="checkbox"/> 79 utilities |
| <input type="checkbox"/> 24 crime | <input type="checkbox"/> 52 mental health & cognition | <input type="checkbox"/> 80 vehicles & traffic |
| <input type="checkbox"/> 25 criminal procedures | <input type="checkbox"/> 53 military & veterans | <input type="checkbox"/> 81 water |
| <input type="checkbox"/> 26 day care | <input type="checkbox"/> 54 mines & mineral resources | <input type="checkbox"/> 82 weapons |
| <input type="checkbox"/> 27 disaster preparedness & relief | <input type="checkbox"/> 55 minors | <input type="checkbox"/> 83 women's issues |
| <input type="checkbox"/> 28 economic & industrial development | <input type="checkbox"/> 56 nursing homes | |
| <input type="checkbox"/> 84 OTHER | | |

13 DOCKET NOS. OR OTHER DESIGNATION

- not applicable
 additional pages

DESIGNATION

AGENCY

DESIGNATION

AGENCY

DESIGNATION

AGENCY

GO TO SCHEDULE B

**AMENDMENT: EMPLOYER / CLIENT
PART 1 - GENERAL INFORMATION**

**FORM AREG
SCHEDULE A PG 1**

Use the Form AREG Instruction Guide for assistance in filling out Schedule A Part 1.

1 PAGE #
Sch: 1/1 Rpt: 15/76

2 REGISTRANT NAME	DeWitt, Cathy S. (Ms.)				
3 EMPLOYER / CLIENT NAME	Austin Firefighters Relief and Retirement Fund				
4 EMPLOYER / CLIENT MAILING ADDRESS	ADDRESS / P.O. BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE
	4101 Parkstone Height Suite 270 Austin, TX 78746				

PART 2 - COMPENSATION

1 LEVEL OF COMPENSATION FOR LOBBYING	Less than \$18,890				
2 TYPE OF COMPENSATION BEING REPORTED	<input type="checkbox"/> PAID	<input type="checkbox"/> EARNED (but not received)	<input checked="" type="checkbox"/> PROSPECTIVE		
3 INDIVIDUAL REPORTING COMPENSATION AND/OR REIMBURSEMENT FOR ENTITY	<input type="checkbox"/> YES	NAME OF ENTITY	_____		
		ADDRESS OF ENTITY	_____		
	<input checked="" type="checkbox"/> NO	PHONE NO. OF ENTITY	_____		

PART 3 - ORGANIZATIONAL INFORMATION

1 IS THE EMPLOYER/CLIENT AN ENTITY OR AN INDIVIDUAL?	<input checked="" type="checkbox"/> ENTITY	<input type="checkbox"/> INDIVIDUAL (Complete PART 4 of SCHEDULE A)
2 IS THE EMPLOYER/CLIENT A CORPORATION?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO (Complete PART 3(a) of SCHEDULE A)
3 ARE THE SHARES OF THE CORPORATION PUBLICLY TRADED?	<input type="checkbox"/> YES (Complete PART 4 of SCHEDULE A)	<input checked="" type="checkbox"/> NO (Complete PART 3(b) of SCHEDULE A)
4 IS THE CLIENT A STATE AGENCY THAT PAYS YOU A SALES COMMISSION OR SUCH FEE?	<input type="checkbox"/> YES (Complete PART 5 of SCHEDULE A)	<input checked="" type="checkbox"/> NO

AMENDMENT: EMPLOYER / CLIENT
Part 3(b) - CORPORATION NOT PUBLICLY TRADED

FORM AREG
SCHEDULE A PG 3

Complete PART 3(b) only if the employer/client covered by this SCHEDULE A is a corporation whose shares are not publicly traded. Attach additional copies of this form as needed.

PAGE #
 Sch: 1/2 Rpt: 16/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 Austin Firefighters Relief and Retirement Fund

1 CORPORATE SHAREHOLDERS	NUMBER OF SHAREHOLDERS N/A
2 CORPORATE OFFICERS AND BOARD MEMBERS <input checked="" type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE Adler, Steve
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 4101 Parkstone Height Suite 270 Austin, TX 78746
	LAST; SUFFIX; FIRST; TITLE Bass, John
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 4101 Parkstone Height Suite 270 Austin, TX 78746
	LAST; SUFFIX; FIRST; TITLE Burke, Jeremy
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 4101 Parkstone Height Suite 270 Austin, TX 78746
	LAST; SUFFIX; FIRST; TITLE Fowler, Doug
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 4101 Parkstone Height Suite 270 Austin, TX 78746
3 CORPORATE OWNERSHIP/ HOLDINGS PERSONS OWNING 10% OR MORE SHARES <input checked="" type="checkbox"/> not applicable <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 3(b) - CORPORATION NOT PUBLICLY TRADED

FORM AREG
SCHEDULE A PG 3

Complete PART 3(b) only if the employer/client covered by this SCHEDULE A is a corporation whose shares are not publicly traded. Attach additional copies of this form as needed.

PAGE #
 Sch: 2/2 Rpt: 17/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 Austin Firefighters Relief and Retirement Fund

1 CORPORATE SHAREHOLDERS	NUMBER OF SHAREHOLDERS N/A
2 CORPORATE OFFICERS AND BOARD MEMBERS <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE Weaver, Belinda
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 4101 Parkstone Height Suite 270 Austin, TX 78746
	LAST; SUFFIX; FIRST; TITLE
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
	LAST; SUFFIX; FIRST; TITLE
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
	LAST; SUFFIX; FIRST; TITLE ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
3 CORPORATE OWNERSHIP/ HOLDINGS PERSONS OWNING 10% OR MORE SHARES <input checked="" type="checkbox"/> not applicable <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 4 - LOBBYING SUBJECT MATTER

FORM AREG
SCHEDULE A PG 4

Use the FORM AREG INSTRUCTION GUIDE for assistance in filling out this form

Page #
 Sch: 1/1 Rpt: 18/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 Austin Firefighters Relief and Retirement Fund

1 SUBJECT MATTER

SUBJECT MATTER CATEGORIES

- | | | |
|------------------------------------------------------------------|---------------------------------------------------------------|-----------------------------------------------------------------------------|
| <input type="checkbox"/> 1 abortion | <input type="checkbox"/> 29 education | <input type="checkbox"/> 57 occupational regulation |
| <input type="checkbox"/> 2 aeronautics | <input type="checkbox"/> 30 elections | <input type="checkbox"/> 58 oil & gas |
| <input type="checkbox"/> 3 aging | <input type="checkbox"/> 31 energy | <input type="checkbox"/> 59 open records & open meetings |
| <input type="checkbox"/> 4 agriculture | <input type="checkbox"/> 32 environment | <input type="checkbox"/> 60 parks & wildlife |
| <input type="checkbox"/> 5 alcoholic beverage regulation | <input type="checkbox"/> 33 ethics | <input type="checkbox"/> 61 political subdivisions |
| <input type="checkbox"/> 6 alcoholism & drug abuse | <input type="checkbox"/> 34 family issues | <input type="checkbox"/> 62 probate |
| <input type="checkbox"/> 7 aliens | <input type="checkbox"/> 35 fees & other non-tax revenue | <input type="checkbox"/> 63 product liability |
| <input type="checkbox"/> 8 amusements, games, sports | <input type="checkbox"/> 36 financial institutions | <input type="checkbox"/> 64 property interests |
| <input type="checkbox"/> 9 animals | <input checked="" type="checkbox"/> 37 fire fighters & police | <input type="checkbox"/> 65 public lands |
| <input type="checkbox"/> 10 arts & humanities | <input type="checkbox"/> 38 gambling | <input type="checkbox"/> 66 purchasing |
| <input checked="" type="checkbox"/> 11 business & commerce | <input type="checkbox"/> 39 handicapped persons | <input type="checkbox"/> 67 redistricting |
| <input type="checkbox"/> 12 cemeteries | <input type="checkbox"/> 40 health & health care | <input type="checkbox"/> 68 religion |
| <input type="checkbox"/> 13 charitable & nonprofit organizations | <input type="checkbox"/> 41 highways & roads | <input checked="" type="checkbox"/> 69 retirement systems |
| <input type="checkbox"/> 14 city government | <input type="checkbox"/> 42 historic preservation & museums | <input type="checkbox"/> 70 safety |
| <input type="checkbox"/> 15 civil remedies & liabilities | <input type="checkbox"/> 43 hospitals | <input type="checkbox"/> 71 special districts & authorities |
| <input type="checkbox"/> 16 coastal affairs & beaches | <input type="checkbox"/> 44 housing | <input checked="" type="checkbox"/> 72 state agencies, boards & commissions |
| <input type="checkbox"/> 17 common carriers | <input type="checkbox"/> 45 human services | <input type="checkbox"/> 73 state employees, officers & symbols |
| <input type="checkbox"/> 18 communication & press | <input type="checkbox"/> 46 insurance | <input type="checkbox"/> 74 state finances |
| <input type="checkbox"/> 19 consumer protection | <input type="checkbox"/> 47 labor | <input type="checkbox"/> 75 taxation |
| <input type="checkbox"/> 20 corporations & associations | <input type="checkbox"/> 48 law enforcement | <input type="checkbox"/> 76 tort reform |
| <input type="checkbox"/> 21 corrections | <input type="checkbox"/> 49 lawyers | <input type="checkbox"/> 77 tourism |
| <input type="checkbox"/> 22 county government | <input type="checkbox"/> 50 libraries | <input type="checkbox"/> 78 transportation |
| <input type="checkbox"/> 23 courts | <input type="checkbox"/> 51 malpractice-health care providers | <input type="checkbox"/> 79 utilities |
| <input type="checkbox"/> 24 crime | <input type="checkbox"/> 52 mental health & cognition | <input type="checkbox"/> 80 vehicles & traffic |
| <input type="checkbox"/> 25 criminal procedures | <input type="checkbox"/> 53 military & veterans | <input type="checkbox"/> 81 water |
| <input type="checkbox"/> 26 day care | <input type="checkbox"/> 54 mines & mineral resources | <input type="checkbox"/> 82 weapons |
| <input type="checkbox"/> 27 disaster preparedness & relief | <input type="checkbox"/> 55 minors | <input type="checkbox"/> 83 women's issues |
| <input type="checkbox"/> 28 economic & industrial development | <input type="checkbox"/> 56 nursing homes | |
| <input type="checkbox"/> 84 OTHER | | |

13 DOCKET NOS. OR OTHER DESIGNATION

- not applicable
 additional pages

DESIGNATION	AGENCY
DESIGNATION	AGENCY
DESIGNATION	AGENCY

GO TO SCHEDULE B

**AMENDMENT: EMPLOYER / CLIENT
PART 1 - GENERAL INFORMATION**

**FORM AREG
SCHEDULE A PG 1**

Use the Form AREG Instruction Guide for assistance in filling out Schedule A Part 1.

1 PAGE #
Sch: 1/1 Rpt: 19/76

2 REGISTRANT NAME	DeWitt, Cathy S. (Ms.)				
3 EMPLOYER / CLIENT NAME	Bombardier Aerospace Corporation				
4 EMPLOYER / CLIENT MAILING ADDRESS	ADDRESS / P.O. BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE
	1 Learjet Way				
	Wichita, KS 67209				

PART 2 - COMPENSATION

1 LEVEL OF COMPENSATION FOR LOBBYING	At least \$18,890 but less than \$47,219.99				
2 TYPE OF COMPENSATION BEING REPORTED	<input type="checkbox"/> PAID	<input type="checkbox"/> EARNED (but not received)	<input checked="" type="checkbox"/> PROSPECTIVE		
3 INDIVIDUAL REPORTING COMPENSATION AND/OR REIMBURSEMENT FOR ENTITY	<input type="checkbox"/> YES	NAME OF ENTITY	_____		
		ADDRESS OF ENTITY	_____		
	<input checked="" type="checkbox"/> NO	PHONE NO. OF ENTITY	_____		

PART 3 - ORGANIZATIONAL INFORMATION

1 IS THE EMPLOYER/CLIENT AN ENTITY OR AN INDIVIDUAL?	<input checked="" type="checkbox"/> ENTITY	<input type="checkbox"/> INDIVIDUAL (Complete PART 4 of SCHEDULE A)
2 IS THE EMPLOYER/CLIENT A CORPORATION?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO (Complete PART 3(a) of SCHEDULE A)
3 ARE THE SHARES OF THE CORPORATION PUBLICLY TRADED?	<input checked="" type="checkbox"/> YES (Complete PART 4 of SCHEDULE A)	<input type="checkbox"/> NO (Complete PART 3(b) of SCHEDULE A)
4 IS THE CLIENT A STATE AGENCY THAT PAYS YOU A SALES COMMISSION OR SUCH FEE?	<input type="checkbox"/> YES (Complete PART 5 of SCHEDULE A)	<input checked="" type="checkbox"/> NO

AMENDMENT: EMPLOYER / CLIENT
Part 4 - LOBBYING SUBJECT MATTER

FORM AREG
SCHEDULE A PG 4

Use the FORM AREG INSTRUCTION GUIDE for assistance in filling out this form

Page #
 Sch: 1/1 Rpt: 20/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 Bombardier Aerospace Corporation

1 SUBJECT MATTER

SUBJECT MATTER CATEGORIES

- | | | |
|--------------------------------------------------------------------------|---------------------------------------------------------------|------------------------------------------------------------------|
| <input type="checkbox"/> 1 abortion | <input type="checkbox"/> 29 education | <input type="checkbox"/> 57 occupational regulation |
| <input type="checkbox"/> 2 aeronautics | <input type="checkbox"/> 30 elections | <input type="checkbox"/> 58 oil & gas |
| <input type="checkbox"/> 3 aging | <input type="checkbox"/> 31 energy | <input type="checkbox"/> 59 open records & open meetings |
| <input type="checkbox"/> 4 agriculture | <input type="checkbox"/> 32 environment | <input type="checkbox"/> 60 parks & wildlife |
| <input type="checkbox"/> 5 alcoholic beverage regulation | <input type="checkbox"/> 33 ethics | <input type="checkbox"/> 61 political subdivisions |
| <input type="checkbox"/> 6 alcoholism & drug abuse | <input type="checkbox"/> 34 family issues | <input type="checkbox"/> 62 probate |
| <input type="checkbox"/> 7 aliens | <input type="checkbox"/> 35 fees & other non-tax revenue | <input type="checkbox"/> 63 product liability |
| <input type="checkbox"/> 8 amusements, games, sports | <input type="checkbox"/> 36 financial institutions | <input type="checkbox"/> 64 property interests |
| <input type="checkbox"/> 9 animals | <input type="checkbox"/> 37 fire fighters & police | <input type="checkbox"/> 65 public lands |
| <input type="checkbox"/> 10 arts & humanities | <input type="checkbox"/> 38 gambling | <input type="checkbox"/> 66 purchasing |
| <input checked="" type="checkbox"/> 11 business & commerce | <input type="checkbox"/> 39 handicapped persons | <input type="checkbox"/> 67 redistricting |
| <input type="checkbox"/> 12 cemeteries | <input type="checkbox"/> 40 health & health care | <input type="checkbox"/> 68 religion |
| <input type="checkbox"/> 13 charitable & nonprofit organizations | <input type="checkbox"/> 41 highways & roads | <input type="checkbox"/> 69 retirement systems |
| <input type="checkbox"/> 14 city government | <input type="checkbox"/> 42 historic preservation & museums | <input type="checkbox"/> 70 safety |
| <input type="checkbox"/> 15 civil remedies & liabilities | <input type="checkbox"/> 43 hospitals | <input type="checkbox"/> 71 special districts & authorities |
| <input type="checkbox"/> 16 coastal affairs & beaches | <input type="checkbox"/> 44 housing | <input type="checkbox"/> 72 state agencies, boards & commissions |
| <input type="checkbox"/> 17 common carriers | <input type="checkbox"/> 45 human services | <input type="checkbox"/> 73 state employees, officers & symbols |
| <input type="checkbox"/> 18 communication & press | <input type="checkbox"/> 46 insurance | <input type="checkbox"/> 74 state finances |
| <input type="checkbox"/> 19 consumer protection | <input type="checkbox"/> 47 labor | <input type="checkbox"/> 75 taxation |
| <input type="checkbox"/> 20 corporations & associations | <input type="checkbox"/> 48 law enforcement | <input type="checkbox"/> 76 tort reform |
| <input type="checkbox"/> 21 corrections | <input type="checkbox"/> 49 lawyers | <input type="checkbox"/> 77 tourism |
| <input type="checkbox"/> 22 county government | <input type="checkbox"/> 50 libraries | <input checked="" type="checkbox"/> 78 transportation |
| <input type="checkbox"/> 23 courts | <input type="checkbox"/> 51 malpractice-health care providers | <input type="checkbox"/> 79 utilities |
| <input type="checkbox"/> 24 crime | <input type="checkbox"/> 52 mental health & cognition | <input type="checkbox"/> 80 vehicles & traffic |
| <input type="checkbox"/> 25 criminal procedures | <input type="checkbox"/> 53 military & veterans | <input type="checkbox"/> 81 water |
| <input type="checkbox"/> 26 day care | <input type="checkbox"/> 54 mines & mineral resources | <input type="checkbox"/> 82 weapons |
| <input type="checkbox"/> 27 disaster preparedness & relief | <input type="checkbox"/> 55 minors | <input type="checkbox"/> 83 women's issues |
| <input checked="" type="checkbox"/> 28 economic & industrial development | <input type="checkbox"/> 56 nursing homes | |
| <input type="checkbox"/> 84 OTHER | | |

13 DOCKET NOS. OR OTHER DESIGNATION

- not applicable
 additional pages

DESIGNATION	AGENCY
DESIGNATION	AGENCY
DESIGNATION	AGENCY

GO TO SCHEDULE B

AMENDMENT: EMPLOYER / CLIENT PART 1 - GENERAL INFORMATION

FORM AREG
SCHEDULE A PG 1

Use the Form AREG Instruction Guide for assistance in filling out Schedule A Part 1.

1 PAGE #
Sch: 1/1 Rpt: 21/76

2 REGISTRANT NAME	DeWitt, Cathy S. (Ms.)				
3 EMPLOYER / CLIENT NAME	Centene Corporation on behalf of its affiliates and subsidiaries including Superior HealthPlan				
4 EMPLOYER / CLIENT MAILING ADDRESS	ADDRESS / P.O. BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE
	5900 E. Ben White Blvd.				
	Austin, TX 78741				

PART 2 - COMPENSATION

1 LEVEL OF COMPENSATION FOR LOBBYING	Less than \$18,890				
2 TYPE OF COMPENSATION BEING REPORTED	<input type="checkbox"/> PAID	<input type="checkbox"/> EARNED (but not received)	<input checked="" type="checkbox"/> PROSPECTIVE		
3 INDIVIDUAL REPORTING COMPENSATION AND/OR REIMBURSEMENT FOR ENTITY	<input type="checkbox"/> YES	NAME OF ENTITY	_____		
		ADDRESS OF ENTITY	_____		
	<input checked="" type="checkbox"/> NO	PHONE NO. OF ENTITY	_____		

PART 3 - ORGANIZATIONAL INFORMATION

1 IS THE EMPLOYER/CLIENT AN ENTITY OR AN INDIVIDUAL?	<input checked="" type="checkbox"/> ENTITY	<input type="checkbox"/> INDIVIDUAL (Complete PART 4 of SCHEDULE A)
2 IS THE EMPLOYER/CLIENT A CORPORATION?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO (Complete PART 3(a) of SCHEDULE A)
3 ARE THE SHARES OF THE CORPORATION PUBLICLY TRADED?	<input checked="" type="checkbox"/> YES (Complete PART 4 of SCHEDULE A)	<input type="checkbox"/> NO (Complete PART 3(b) of SCHEDULE A)
4 IS THE CLIENT A STATE AGENCY THAT PAYS YOU A SALES COMMISSION OR SUCH FEE?	<input type="checkbox"/> YES (Complete PART 5 of SCHEDULE A)	<input checked="" type="checkbox"/> NO

AMENDMENT: EMPLOYER / CLIENT
Part 4 - LOBBYING SUBJECT MATTER

FORM AREG
SCHEDULE A PG 4

Use the FORM AREG INSTRUCTION GUIDE for assistance in filling out this form

Page #
 Sch: 1/1 Rpt: 22/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 Centene Corporation on behalf of its affiliates and subsidiaries including Superior HealthPlan

1 SUBJECT MATTER

SUBJECT MATTER CATEGORIES

- | | | |
|------------------------------------------------------------------|---------------------------------------------------------------|-----------------------------------------------------------------------------|
| <input type="checkbox"/> 1 abortion | <input type="checkbox"/> 29 education | <input type="checkbox"/> 57 occupational regulation |
| <input type="checkbox"/> 2 aeronautics | <input type="checkbox"/> 30 elections | <input type="checkbox"/> 58 oil & gas |
| <input type="checkbox"/> 3 aging | <input type="checkbox"/> 31 energy | <input type="checkbox"/> 59 open records & open meetings |
| <input type="checkbox"/> 4 agriculture | <input type="checkbox"/> 32 environment | <input type="checkbox"/> 60 parks & wildlife |
| <input type="checkbox"/> 5 alcoholic beverage regulation | <input type="checkbox"/> 33 ethics | <input type="checkbox"/> 61 political subdivisions |
| <input type="checkbox"/> 6 alcoholism & drug abuse | <input type="checkbox"/> 34 family issues | <input type="checkbox"/> 62 probate |
| <input type="checkbox"/> 7 aliens | <input type="checkbox"/> 35 fees & other non-tax revenue | <input type="checkbox"/> 63 product liability |
| <input type="checkbox"/> 8 amusements, games, sports | <input type="checkbox"/> 36 financial institutions | <input type="checkbox"/> 64 property interests |
| <input type="checkbox"/> 9 animals | <input type="checkbox"/> 37 fire fighters & police | <input type="checkbox"/> 65 public lands |
| <input type="checkbox"/> 10 arts & humanities | <input type="checkbox"/> 38 gambling | <input type="checkbox"/> 66 purchasing |
| <input checked="" type="checkbox"/> 11 business & commerce | <input type="checkbox"/> 39 handicapped persons | <input type="checkbox"/> 67 redistricting |
| <input type="checkbox"/> 12 cemeteries | <input checked="" type="checkbox"/> 40 health & health care | <input type="checkbox"/> 68 religion |
| <input type="checkbox"/> 13 charitable & nonprofit organizations | <input type="checkbox"/> 41 highways & roads | <input type="checkbox"/> 69 retirement systems |
| <input type="checkbox"/> 14 city government | <input type="checkbox"/> 42 historic preservation & museums | <input type="checkbox"/> 70 safety |
| <input type="checkbox"/> 15 civil remedies & liabilities | <input checked="" type="checkbox"/> 43 hospitals | <input type="checkbox"/> 71 special districts & authorities |
| <input type="checkbox"/> 16 coastal affairs & beaches | <input type="checkbox"/> 44 housing | <input checked="" type="checkbox"/> 72 state agencies, boards & commissions |
| <input type="checkbox"/> 17 common carriers | <input checked="" type="checkbox"/> 45 human services | <input type="checkbox"/> 73 state employees, officers & symbols |
| <input type="checkbox"/> 18 communication & press | <input checked="" type="checkbox"/> 46 insurance | <input checked="" type="checkbox"/> 74 state finances |
| <input type="checkbox"/> 19 consumer protection | <input type="checkbox"/> 47 labor | <input type="checkbox"/> 75 taxation |
| <input type="checkbox"/> 20 corporations & associations | <input type="checkbox"/> 48 law enforcement | <input type="checkbox"/> 76 tort reform |
| <input type="checkbox"/> 21 corrections | <input type="checkbox"/> 49 lawyers | <input type="checkbox"/> 77 tourism |
| <input type="checkbox"/> 22 county government | <input type="checkbox"/> 50 libraries | <input type="checkbox"/> 78 transportation |
| <input type="checkbox"/> 23 courts | <input type="checkbox"/> 51 malpractice-health care providers | <input type="checkbox"/> 79 utilities |
| <input type="checkbox"/> 24 crime | <input type="checkbox"/> 52 mental health & cognition | <input type="checkbox"/> 80 vehicles & traffic |
| <input type="checkbox"/> 25 criminal procedures | <input type="checkbox"/> 53 military & veterans | <input type="checkbox"/> 81 water |
| <input type="checkbox"/> 26 day care | <input type="checkbox"/> 54 mines & mineral resources | <input type="checkbox"/> 82 weapons |
| <input type="checkbox"/> 27 disaster preparedness & relief | <input checked="" type="checkbox"/> 55 minors | <input type="checkbox"/> 83 women's issues |
| <input type="checkbox"/> 28 economic & industrial development | <input checked="" type="checkbox"/> 56 nursing homes | |
| <input type="checkbox"/> 84 OTHER | | |

13 DOCKET NOS. OR OTHER DESIGNATION

- not applicable
 additional pages

DESIGNATION	AGENCY
DESIGNATION	AGENCY
DESIGNATION	AGENCY

GO TO SCHEDULE B

**AMENDMENT: EMPLOYER / CLIENT
PART 1 - GENERAL INFORMATION**

**FORM AREG
SCHEDULE A PG 1**

Use the Form AREG Instruction Guide for assistance in filling out Schedule A Part 1.

1 PAGE #
Sch: 1/1 Rpt: 23/76

2 REGISTRANT NAME	DeWitt, Cathy S. (Ms.)				
3 EMPLOYER / CLIENT NAME	City of Killeen				
4 EMPLOYER / CLIENT MAILING ADDRESS	ADDRESS / P.O. BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE
	P. O. Box 1329				
	Killeen, TX 76540				

PART 2 - COMPENSATION

1 LEVEL OF COMPENSATION FOR LOBBYING	At least \$47,220 but less than \$94,439.99				
2 TYPE OF COMPENSATION BEING REPORTED	<input type="checkbox"/> PAID	<input type="checkbox"/> EARNED (but not received)	<input checked="" type="checkbox"/> PROSPECTIVE		
3 INDIVIDUAL REPORTING COMPENSATION AND/OR REIMBURSEMENT FOR ENTITY	<input type="checkbox"/> YES	NAME OF ENTITY	_____		
		ADDRESS OF ENTITY	_____		
	<input checked="" type="checkbox"/> NO	PHONE NO. OF ENTITY	_____		

PART 3 - ORGANIZATIONAL INFORMATION

1 IS THE EMPLOYER/CLIENT AN ENTITY OR AN INDIVIDUAL?	<input checked="" type="checkbox"/> ENTITY	<input type="checkbox"/> INDIVIDUAL (Complete PART 4 of SCHEDULE A)
2 IS THE EMPLOYER/CLIENT A CORPORATION?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO (Complete PART 3(a) of SCHEDULE A)
3 ARE THE SHARES OF THE CORPORATION PUBLICLY TRADED?	<input type="checkbox"/> YES (Complete PART 4 of SCHEDULE A)	<input checked="" type="checkbox"/> NO (Complete PART 3(b) of SCHEDULE A)
4 IS THE CLIENT A STATE AGENCY THAT PAYS YOU A SALES COMMISSION OR SUCH FEE?	<input type="checkbox"/> YES (Complete PART 5 of SCHEDULE A)	<input checked="" type="checkbox"/> NO

AMENDMENT: EMPLOYER / CLIENT
Part 3(b) - CORPORATION NOT PUBLICLY TRADED

FORM AREG
SCHEDULE A PG 3

Complete PART 3(b) only if the employer/client covered by this SCHEDULE A is a corporation whose shares are not publicly traded. Attach additional copies of this form as needed.

PAGE #
 Sch: 1/2 Rpt: 24/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 City of Killeen

1 CORPORATE SHAREHOLDERS	NUMBER OF SHAREHOLDERS N/A
2 CORPORATE OFFICERS AND BOARD MEMBERS <input checked="" type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE Boyd, Michael
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE P. O. Box 1329 Killeen, TX 76540
	LAST; SUFFIX; FIRST; TITLE Brown, Mellisa
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE P. O. Box 1329 Killeen, TX 76540
	LAST; SUFFIX; FIRST; TITLE Cobb, Nina
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE P. O. Box 1329 Killeen, TX 76540
	LAST; SUFFIX; FIRST; TITLE Gonzalez, Jessica
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE P. O. Box 1329 Killeen, TX 76540
3 CORPORATE OWNERSHIP/ HOLDINGS PERSONS OWNING 10% OR MORE SHARES <input checked="" type="checkbox"/> not applicable <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 3(b) - CORPORATION NOT PUBLICLY TRADED

FORM AREG
SCHEDULE A PG 3

Complete PART 3(b) only if the employer/client covered by this SCHEDULE A is a corporation whose shares are not publicly traded. Attach additional copies of this form as needed.

PAGE #
 Sch: 2/2 Rpt: 25/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 City of Killeen

1 CORPORATE SHAREHOLDERS	NUMBER OF SHAREHOLDERS N/A
2 CORPORATE OFFICERS AND BOARD MEMBERS <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE Nash-King, Debbie
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE P. O. Box 1329 Killeen, TX 76540
	LAST; SUFFIX; FIRST; TITLE Segarra, Jose L.
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE P. O. Box 1329 Killeen, TX 76540
	LAST; SUFFIX; FIRST; TITLE Wilkerson, Ken
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE P. O. Box 1329 Killeen, TX 76540
	LAST; SUFFIX; FIRST; TITLE Williams, Rick
3 CORPORATE OWNERSHIP/ HOLDINGS PERSONS OWNING 10% OR MORE SHARES <input checked="" type="checkbox"/> not applicable <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 4 - LOBBYING SUBJECT MATTER

FORM AREG
SCHEDULE A PG 4

Use the FORM AREG INSTRUCTION GUIDE for assistance in filling out this form

Page #
 Sch: 1/1 Rpt: 26/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 City of Killeen

1 SUBJECT MATTER

SUBJECT MATTER CATEGORIES

- | | | |
|------------------------------------------------------------------|---------------------------------------------------------------|------------------------------------------------------------------|
| <input type="checkbox"/> 1 abortion | <input type="checkbox"/> 29 education | <input type="checkbox"/> 57 occupational regulation |
| <input type="checkbox"/> 2 aeronautics | <input type="checkbox"/> 30 elections | <input type="checkbox"/> 58 oil & gas |
| <input type="checkbox"/> 3 aging | <input type="checkbox"/> 31 energy | <input type="checkbox"/> 59 open records & open meetings |
| <input type="checkbox"/> 4 agriculture | <input type="checkbox"/> 32 environment | <input type="checkbox"/> 60 parks & wildlife |
| <input type="checkbox"/> 5 alcoholic beverage regulation | <input type="checkbox"/> 33 ethics | <input type="checkbox"/> 61 political subdivisions |
| <input type="checkbox"/> 6 alcoholism & drug abuse | <input type="checkbox"/> 34 family issues | <input type="checkbox"/> 62 probate |
| <input type="checkbox"/> 7 aliens | <input type="checkbox"/> 35 fees & other non-tax revenue | <input type="checkbox"/> 63 product liability |
| <input type="checkbox"/> 8 amusements, games, sports | <input type="checkbox"/> 36 financial institutions | <input type="checkbox"/> 64 property interests |
| <input type="checkbox"/> 9 animals | <input type="checkbox"/> 37 fire fighters & police | <input type="checkbox"/> 65 public lands |
| <input type="checkbox"/> 10 arts & humanities | <input type="checkbox"/> 38 gambling | <input type="checkbox"/> 66 purchasing |
| <input checked="" type="checkbox"/> 11 business & commerce | <input type="checkbox"/> 39 handicapped persons | <input type="checkbox"/> 67 redistricting |
| <input type="checkbox"/> 12 cemeteries | <input type="checkbox"/> 40 health & health care | <input type="checkbox"/> 68 religion |
| <input type="checkbox"/> 13 charitable & nonprofit organizations | <input type="checkbox"/> 41 highways & roads | <input type="checkbox"/> 69 retirement systems |
| <input checked="" type="checkbox"/> 14 city government | <input type="checkbox"/> 42 historic preservation & museums | <input type="checkbox"/> 70 safety |
| <input type="checkbox"/> 15 civil remedies & liabilities | <input type="checkbox"/> 43 hospitals | <input type="checkbox"/> 71 special districts & authorities |
| <input type="checkbox"/> 16 coastal affairs & beaches | <input type="checkbox"/> 44 housing | <input type="checkbox"/> 72 state agencies, boards & commissions |
| <input type="checkbox"/> 17 common carriers | <input type="checkbox"/> 45 human services | <input type="checkbox"/> 73 state employees, officers & symbols |
| <input type="checkbox"/> 18 communication & press | <input type="checkbox"/> 46 insurance | <input type="checkbox"/> 74 state finances |
| <input type="checkbox"/> 19 consumer protection | <input type="checkbox"/> 47 labor | <input checked="" type="checkbox"/> 75 taxation |
| <input type="checkbox"/> 20 corporations & associations | <input type="checkbox"/> 48 law enforcement | <input type="checkbox"/> 76 tort reform |
| <input type="checkbox"/> 21 corrections | <input type="checkbox"/> 49 lawyers | <input type="checkbox"/> 77 tourism |
| <input type="checkbox"/> 22 county government | <input type="checkbox"/> 50 libraries | <input type="checkbox"/> 78 transportation |
| <input type="checkbox"/> 23 courts | <input type="checkbox"/> 51 malpractice-health care providers | <input type="checkbox"/> 79 utilities |
| <input type="checkbox"/> 24 crime | <input type="checkbox"/> 52 mental health & cognition | <input type="checkbox"/> 80 vehicles & traffic |
| <input type="checkbox"/> 25 criminal procedures | <input checked="" type="checkbox"/> 53 military & veterans | <input type="checkbox"/> 81 water |
| <input type="checkbox"/> 26 day care | <input type="checkbox"/> 54 mines & mineral resources | <input type="checkbox"/> 82 weapons |
| <input type="checkbox"/> 27 disaster preparedness & relief | <input type="checkbox"/> 55 minors | <input type="checkbox"/> 83 women's issues |
| <input type="checkbox"/> 28 economic & industrial development | <input type="checkbox"/> 56 nursing homes | |
| <input type="checkbox"/> 84 OTHER | | |

13 DOCKET NOS. OR OTHER DESIGNATION

- not applicable
 additional pages

DESIGNATION

AGENCY

DESIGNATION

AGENCY

DESIGNATION

AGENCY

GO TO SCHEDULE B

**AMENDMENT: EMPLOYER / CLIENT
PART 1 - GENERAL INFORMATION**

**FORM AREG
SCHEDULE A PG 1**

Use the Form AREG Instruction Guide for assistance in filling out Schedule A Part 1.

1 PAGE #
Sch: 1/1 Rpt: 27/76

2 REGISTRANT NAME	DeWitt, Cathy S. (Ms.)				
3 EMPLOYER / CLIENT NAME	College Nannies + Sitters				
4 EMPLOYER / CLIENT MAILING ADDRESS	ADDRESS / P.O. BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE
	4544 South Lamar				
	Austin, TX 78741				

PART 2 - COMPENSATION

1 LEVEL OF COMPENSATION FOR LOBBYING	At least \$18,890 but less than \$47,219.99				
2 TYPE OF COMPENSATION BEING REPORTED	<input type="checkbox"/> PAID	<input type="checkbox"/> EARNED (but not received)	<input checked="" type="checkbox"/> PROSPECTIVE		
3 INDIVIDUAL REPORTING COMPENSATION AND/OR REIMBURSEMENT FOR ENTITY	<input type="checkbox"/> YES	NAME OF ENTITY	_____		
		ADDRESS OF ENTITY	_____		
	<input checked="" type="checkbox"/> NO	PHONE NO. OF ENTITY	_____		

PART 3 - ORGANIZATIONAL INFORMATION

1 IS THE EMPLOYER/CLIENT AN ENTITY OR AN INDIVIDUAL?	<input checked="" type="checkbox"/> ENTITY	<input type="checkbox"/> INDIVIDUAL (Complete PART 4 of SCHEDULE A)
2 IS THE EMPLOYER/CLIENT A CORPORATION?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO (Complete PART 3(a) of SCHEDULE A)
3 ARE THE SHARES OF THE CORPORATION PUBLICLY TRADED?	<input type="checkbox"/> YES (Complete PART 4 of SCHEDULE A)	<input type="checkbox"/> NO (Complete PART 3(b) of SCHEDULE A)
4 IS THE CLIENT A STATE AGENCY THAT PAYS YOU A SALES COMMISSION OR SUCH FEE?	<input type="checkbox"/> YES (Complete PART 5 of SCHEDULE A)	<input checked="" type="checkbox"/> NO

AMENDMENT: EMPLOYER / CLIENT
Part 3(a) - UNINCORPORATED ENTITY

FORM AREG
SCHEDULE A PG 2

Complete PART 3(a) only if the employer/client covered by this SCHEDULE A is an unincorporated entity. Attach additional copies of this form as needed.

PAGE #
 Sch: 1/1 Rpt: 28/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 College Nannies + Sitters

1 ENTITY MEMBERSHIP	NUMBER OF MEMBERS 26
2 NAME(S) OF PERSON(S) WHO DETERMINE LOBBY POLICY <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE Dupuy, Kathy
	LAST; SUFFIX; FIRST; TITLE Dupuy, Stuart
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
3 DESCRIPTION OF POLICY-MAKING METHODS <input type="checkbox"/> additional pages	DESCRIBE METHODS OF ENTITY DECISION-MAKING RELATING TO LOBBYING After research and discussions majority vote of the board.
4 CONTRIBUTORS PERSON(S) CONTRIBUTING MORE THAN \$250 PER YEAR <input checked="" type="checkbox"/> not applicable <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 4 - LOBBYING SUBJECT MATTER

FORM AREG
SCHEDULE A PG 4

Use the FORM AREG INSTRUCTION GUIDE for assistance in filling out this form

Page #
 Sch: 1/1 Rpt: 29/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 College Nannies + Sitters

1 SUBJECT MATTER

SUBJECT MATTER CATEGORIES

- | | | |
|------------------------------------------------------------------|---------------------------------------------------------------|-----------------------------------------------------------------------------|
| <input type="checkbox"/> 1 abortion | <input type="checkbox"/> 29 education | <input checked="" type="checkbox"/> 57 occupational regulation |
| <input type="checkbox"/> 2 aeronautics | <input type="checkbox"/> 30 elections | <input type="checkbox"/> 58 oil & gas |
| <input type="checkbox"/> 3 aging | <input type="checkbox"/> 31 energy | <input type="checkbox"/> 59 open records & open meetings |
| <input type="checkbox"/> 4 agriculture | <input type="checkbox"/> 32 environment | <input type="checkbox"/> 60 parks & wildlife |
| <input type="checkbox"/> 5 alcoholic beverage regulation | <input type="checkbox"/> 33 ethics | <input type="checkbox"/> 61 political subdivisions |
| <input type="checkbox"/> 6 alcoholism & drug abuse | <input type="checkbox"/> 34 family issues | <input type="checkbox"/> 62 probate |
| <input type="checkbox"/> 7 aliens | <input type="checkbox"/> 35 fees & other non-tax revenue | <input type="checkbox"/> 63 product liability |
| <input type="checkbox"/> 8 amusements, games, sports | <input type="checkbox"/> 36 financial institutions | <input type="checkbox"/> 64 property interests |
| <input type="checkbox"/> 9 animals | <input type="checkbox"/> 37 fire fighters & police | <input type="checkbox"/> 65 public lands |
| <input type="checkbox"/> 10 arts & humanities | <input type="checkbox"/> 38 gambling | <input type="checkbox"/> 66 purchasing |
| <input checked="" type="checkbox"/> 11 business & commerce | <input type="checkbox"/> 39 handicapped persons | <input type="checkbox"/> 67 redistricting |
| <input type="checkbox"/> 12 cemeteries | <input type="checkbox"/> 40 health & health care | <input type="checkbox"/> 68 religion |
| <input type="checkbox"/> 13 charitable & nonprofit organizations | <input type="checkbox"/> 41 highways & roads | <input type="checkbox"/> 69 retirement systems |
| <input type="checkbox"/> 14 city government | <input type="checkbox"/> 42 historic preservation & museums | <input type="checkbox"/> 70 safety |
| <input type="checkbox"/> 15 civil remedies & liabilities | <input type="checkbox"/> 43 hospitals | <input type="checkbox"/> 71 special districts & authorities |
| <input type="checkbox"/> 16 coastal affairs & beaches | <input type="checkbox"/> 44 housing | <input checked="" type="checkbox"/> 72 state agencies, boards & commissions |
| <input type="checkbox"/> 17 common carriers | <input type="checkbox"/> 45 human services | <input type="checkbox"/> 73 state employees, officers & symbols |
| <input type="checkbox"/> 18 communication & press | <input checked="" type="checkbox"/> 46 insurance | <input type="checkbox"/> 74 state finances |
| <input type="checkbox"/> 19 consumer protection | <input type="checkbox"/> 47 labor | <input type="checkbox"/> 75 taxation |
| <input type="checkbox"/> 20 corporations & associations | <input type="checkbox"/> 48 law enforcement | <input type="checkbox"/> 76 tort reform |
| <input type="checkbox"/> 21 corrections | <input type="checkbox"/> 49 lawyers | <input type="checkbox"/> 77 tourism |
| <input type="checkbox"/> 22 county government | <input type="checkbox"/> 50 libraries | <input type="checkbox"/> 78 transportation |
| <input type="checkbox"/> 23 courts | <input type="checkbox"/> 51 malpractice-health care providers | <input type="checkbox"/> 79 utilities |
| <input type="checkbox"/> 24 crime | <input type="checkbox"/> 52 mental health & cognition | <input type="checkbox"/> 80 vehicles & traffic |
| <input type="checkbox"/> 25 criminal procedures | <input type="checkbox"/> 53 military & veterans | <input type="checkbox"/> 81 water |
| <input checked="" type="checkbox"/> 26 day care | <input type="checkbox"/> 54 mines & mineral resources | <input type="checkbox"/> 82 weapons |
| <input type="checkbox"/> 27 disaster preparedness & relief | <input checked="" type="checkbox"/> 55 minors | <input type="checkbox"/> 83 women's issues |
| <input type="checkbox"/> 28 economic & industrial development | <input type="checkbox"/> 56 nursing homes | |
| <input type="checkbox"/> 84 OTHER | | |

13 DOCKET NOS. OR OTHER DESIGNATION

- not applicable
 additional pages

DESIGNATION

AGENCY

DESIGNATION

AGENCY

DESIGNATION

AGENCY

GO TO SCHEDULE B

**AMENDMENT: EMPLOYER / CLIENT
PART 1 - GENERAL INFORMATION**

**FORM AREG
SCHEDULE A PG 1**

Use the Form AREG Instruction Guide for assistance in filling out Schedule A Part 1.

1 PAGE #
Sch: 1/1 Rpt: 30/76

2 REGISTRANT NAME	DeWitt, Cathy S. (Ms.)				
3 EMPLOYER / CLIENT NAME	MV Transportation, Inc				
4 EMPLOYER / CLIENT MAILING ADDRESS	ADDRESS / P.O. BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE
	2711 N. Haskell Ave. Suite 1500, LB-2 Dallas, TX 75204				

PART 2 - COMPENSATION

1 LEVEL OF COMPENSATION FOR LOBBYING	At least \$18,890 but less than \$47,219.99				
2 TYPE OF COMPENSATION BEING REPORTED	<input type="checkbox"/> PAID	<input type="checkbox"/> EARNED (but not received)	<input checked="" type="checkbox"/> PROSPECTIVE		
3 INDIVIDUAL REPORTING COMPENSATION AND/OR REIMBURSEMENT FOR ENTITY	<input type="checkbox"/> YES	NAME OF ENTITY	_____		
		ADDRESS OF ENTITY	_____		
	<input checked="" type="checkbox"/> NO	PHONE NO. OF ENTITY	_____		

PART 3 - ORGANIZATIONAL INFORMATION

1 IS THE EMPLOYER/CLIENT AN ENTITY OR AN INDIVIDUAL?	<input checked="" type="checkbox"/> ENTITY	<input type="checkbox"/> INDIVIDUAL (Complete PART 4 of SCHEDULE A)
2 IS THE EMPLOYER/CLIENT A CORPORATION?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO (Complete PART 3(a) of SCHEDULE A)
3 ARE THE SHARES OF THE CORPORATION PUBLICLY TRADED?	<input type="checkbox"/> YES (Complete PART 4 of SCHEDULE A)	<input checked="" type="checkbox"/> NO (Complete PART 3(b) of SCHEDULE A)
4 IS THE CLIENT A STATE AGENCY THAT PAYS YOU A SALES COMMISSION OR SUCH FEE?	<input type="checkbox"/> YES (Complete PART 5 of SCHEDULE A)	<input checked="" type="checkbox"/> NO

AMENDMENT: EMPLOYER / CLIENT
Part 3(b) - CORPORATION NOT PUBLICLY TRADED

FORM AREG
SCHEDULE A PG 3

Complete PART 3(b) only if the employer/client covered by this SCHEDULE A is a corporation whose shares are not publicly traded. Attach additional copies of this form as needed.

PAGE #
 Sch: 1/2 Rpt: 31/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 MV Transportation, Inc

1 CORPORATE SHAREHOLDERS	NUMBER OF SHAREHOLDERS N/A
2 CORPORATE OFFICERS AND BOARD MEMBERS <input checked="" type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE Egan, Tom
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2711 N. Haskell Ave. Suite 1500, LB-2 Dallas, TX 75204
	LAST; SUFFIX; FIRST; TITLE Hicks, Lisa Winston
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2711 N. Haskell Ave. Suite 1500, LB-2 Dallas, TX 75204
	LAST; SUFFIX; FIRST; TITLE Letier, Scott
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2711 N. Haskell Ave. Suite 1500, LB-2 Dallas, TX 75204
	LAST; SUFFIX; FIRST; TITLE Lodde, Alex ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2711 N. Haskell Ave. Suite 1500, LB-2 Dallas, TX 75204
3 CORPORATE OWNERSHIP/ HOLDINGS PERSONS OWNING 10% OR MORE SHARES <input checked="" type="checkbox"/> not applicable <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 3(b) - CORPORATION NOT PUBLICLY TRADED

FORM AREG
SCHEDULE A PG 3

Complete PART 3(b) only if the employer/client covered by this SCHEDULE A is a corporation whose shares are not publicly traded. Attach additional copies of this form as needed.

PAGE #
 Sch: 2/2 Rpt: 32/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 MV Transportation, Inc

1 CORPORATE SHAREHOLDERS	NUMBER OF SHAREHOLDERS N/A
2 CORPORATE OFFICERS AND BOARD MEMBERS <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE Lodde, Feysan
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2711 N. Haskell Ave. Suite 1500, LB-2 Dallas, TX 75204
	LAST; SUFFIX; FIRST; TITLE Rogers, John
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2711 N. Haskell Ave. Suite 1500, LB-2 Dallas, TX 75204
	LAST; SUFFIX; FIRST; TITLE
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
	LAST; SUFFIX; FIRST; TITLE
ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE	
3 CORPORATE OWNERSHIP/ HOLDINGS PERSONS OWNING 10% OR MORE SHARES <input checked="" type="checkbox"/> not applicable <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 4 - LOBBYING SUBJECT MATTER

FORM AREG
SCHEDULE A PG 4

Use the FORM AREG INSTRUCTION GUIDE for assistance in filling out this form

Page #
 Sch: 1/1 Rpt: 33/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 MV Transportation, Inc

1 SUBJECT MATTER

SUBJECT MATTER CATEGORIES

- | | | |
|------------------------------------------------------------------|---------------------------------------------------------------|-----------------------------------------------------------------------------|
| <input type="checkbox"/> 1 abortion | <input type="checkbox"/> 29 education | <input type="checkbox"/> 57 occupational regulation |
| <input type="checkbox"/> 2 aeronautics | <input type="checkbox"/> 30 elections | <input type="checkbox"/> 58 oil & gas |
| <input type="checkbox"/> 3 aging | <input type="checkbox"/> 31 energy | <input type="checkbox"/> 59 open records & open meetings |
| <input type="checkbox"/> 4 agriculture | <input type="checkbox"/> 32 environment | <input type="checkbox"/> 60 parks & wildlife |
| <input type="checkbox"/> 5 alcoholic beverage regulation | <input type="checkbox"/> 33 ethics | <input type="checkbox"/> 61 political subdivisions |
| <input type="checkbox"/> 6 alcoholism & drug abuse | <input type="checkbox"/> 34 family issues | <input type="checkbox"/> 62 probate |
| <input type="checkbox"/> 7 aliens | <input type="checkbox"/> 35 fees & other non-tax revenue | <input type="checkbox"/> 63 product liability |
| <input type="checkbox"/> 8 amusements, games, sports | <input type="checkbox"/> 36 financial institutions | <input type="checkbox"/> 64 property interests |
| <input type="checkbox"/> 9 animals | <input type="checkbox"/> 37 fire fighters & police | <input type="checkbox"/> 65 public lands |
| <input type="checkbox"/> 10 arts & humanities | <input type="checkbox"/> 38 gambling | <input type="checkbox"/> 66 purchasing |
| <input checked="" type="checkbox"/> 11 business & commerce | <input checked="" type="checkbox"/> 39 handicapped persons | <input type="checkbox"/> 67 redistricting |
| <input type="checkbox"/> 12 cemeteries | <input type="checkbox"/> 40 health & health care | <input type="checkbox"/> 68 religion |
| <input type="checkbox"/> 13 charitable & nonprofit organizations | <input type="checkbox"/> 41 highways & roads | <input type="checkbox"/> 69 retirement systems |
| <input checked="" type="checkbox"/> 14 city government | <input type="checkbox"/> 42 historic preservation & museums | <input type="checkbox"/> 70 safety |
| <input type="checkbox"/> 15 civil remedies & liabilities | <input type="checkbox"/> 43 hospitals | <input type="checkbox"/> 71 special districts & authorities |
| <input type="checkbox"/> 16 coastal affairs & beaches | <input type="checkbox"/> 44 housing | <input checked="" type="checkbox"/> 72 state agencies, boards & commissions |
| <input type="checkbox"/> 17 common carriers | <input type="checkbox"/> 45 human services | <input type="checkbox"/> 73 state employees, officers & symbols |
| <input type="checkbox"/> 18 communication & press | <input type="checkbox"/> 46 insurance | <input type="checkbox"/> 74 state finances |
| <input type="checkbox"/> 19 consumer protection | <input type="checkbox"/> 47 labor | <input type="checkbox"/> 75 taxation |
| <input type="checkbox"/> 20 corporations & associations | <input type="checkbox"/> 48 law enforcement | <input type="checkbox"/> 76 tort reform |
| <input type="checkbox"/> 21 corrections | <input type="checkbox"/> 49 lawyers | <input type="checkbox"/> 77 tourism |
| <input checked="" type="checkbox"/> 22 county government | <input type="checkbox"/> 50 libraries | <input checked="" type="checkbox"/> 78 transportation |
| <input type="checkbox"/> 23 courts | <input type="checkbox"/> 51 malpractice-health care providers | <input type="checkbox"/> 79 utilities |
| <input type="checkbox"/> 24 crime | <input type="checkbox"/> 52 mental health & cognition | <input type="checkbox"/> 80 vehicles & traffic |
| <input type="checkbox"/> 25 criminal procedures | <input type="checkbox"/> 53 military & veterans | <input type="checkbox"/> 81 water |
| <input type="checkbox"/> 26 day care | <input type="checkbox"/> 54 mines & mineral resources | <input type="checkbox"/> 82 weapons |
| <input type="checkbox"/> 27 disaster preparedness & relief | <input type="checkbox"/> 55 minors | <input type="checkbox"/> 83 women's issues |
| <input type="checkbox"/> 28 economic & industrial development | <input type="checkbox"/> 56 nursing homes | |
| <input type="checkbox"/> 84 OTHER | | |

13 DOCKET NOS. OR OTHER DESIGNATION

- not applicable
 additional pages

DESIGNATION

AGENCY

DESIGNATION

AGENCY

DESIGNATION

AGENCY

GO TO SCHEDULE B

AMENDMENT: EMPLOYER / CLIENT PART 1 - GENERAL INFORMATION

FORM AREG
SCHEDULE A PG 1

Use the Form AREG Instruction Guide for assistance in filling out Schedule A Part 1.

1 PAGE #
Sch: 1/1 Rpt: 34/76

2 REGISTRANT NAME	DeWitt, Cathy S. (Ms.)
3 EMPLOYER / CLIENT NAME	Medtronic, Inc.
4 EMPLOYER / CLIENT MAILING ADDRESS	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 710 Medtronic Parkway NE LC370 Minneapolis, MN 55432

PART 2 - COMPENSATION

1 LEVEL OF COMPENSATION FOR LOBBYING	At least \$18,890 but less than \$47,219.99
2 TYPE OF COMPENSATION BEING REPORTED	<input type="checkbox"/> PAID <input type="checkbox"/> EARNED (but not received) <input checked="" type="checkbox"/> PROSPECTIVE
3 INDIVIDUAL REPORTING COMPENSATION AND/OR REIMBURSEMENT FOR ENTITY	<input type="checkbox"/> YES NAME OF ENTITY _____ ADDRESS OF ENTITY _____ <input checked="" type="checkbox"/> NO PHONE NO. OF ENTITY _____

PART 3 - ORGANIZATIONAL INFORMATION

1 IS THE EMPLOYER/CLIENT AN ENTITY OR AN INDIVIDUAL?	<input checked="" type="checkbox"/> ENTITY <input type="checkbox"/> INDIVIDUAL (Complete PART 4 of SCHEDULE A)
2 IS THE EMPLOYER/CLIENT A CORPORATION?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (Complete PART 3(a) of SCHEDULE A)
3 ARE THE SHARES OF THE CORPORATION PUBLICLY TRADED?	<input checked="" type="checkbox"/> YES (Complete PART 4 of SCHEDULE A) <input type="checkbox"/> NO (Complete PART 3(b) of SCHEDULE A)
4 IS THE CLIENT A STATE AGENCY THAT PAYS YOU A SALES COMMISSION OR SUCH FEE?	<input type="checkbox"/> YES (Complete PART 5 of SCHEDULE A) <input checked="" type="checkbox"/> NO

AMENDMENT: EMPLOYER / CLIENT
Part 4 - LOBBYING SUBJECT MATTER

FORM AREG
SCHEDULE A PG 4

Use the FORM AREG INSTRUCTION GUIDE for assistance in filling out this form

Page #
 Sch: 1/1 Rpt: 35/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 Medtronic, Inc.

1 SUBJECT MATTER

SUBJECT MATTER CATEGORIES

- | | | |
|------------------------------------------------------------------|---------------------------------------------------------------|------------------------------------------------------------------|
| <input type="checkbox"/> 1 abortion | <input type="checkbox"/> 29 education | <input type="checkbox"/> 57 occupational regulation |
| <input type="checkbox"/> 2 aeronautics | <input type="checkbox"/> 30 elections | <input type="checkbox"/> 58 oil & gas |
| <input type="checkbox"/> 3 aging | <input type="checkbox"/> 31 energy | <input type="checkbox"/> 59 open records & open meetings |
| <input type="checkbox"/> 4 agriculture | <input type="checkbox"/> 32 environment | <input type="checkbox"/> 60 parks & wildlife |
| <input type="checkbox"/> 5 alcoholic beverage regulation | <input type="checkbox"/> 33 ethics | <input type="checkbox"/> 61 political subdivisions |
| <input type="checkbox"/> 6 alcoholism & drug abuse | <input type="checkbox"/> 34 family issues | <input type="checkbox"/> 62 probate |
| <input type="checkbox"/> 7 aliens | <input type="checkbox"/> 35 fees & other non-tax revenue | <input type="checkbox"/> 63 product liability |
| <input type="checkbox"/> 8 amusements, games, sports | <input type="checkbox"/> 36 financial institutions | <input type="checkbox"/> 64 property interests |
| <input type="checkbox"/> 9 animals | <input type="checkbox"/> 37 fire fighters & police | <input type="checkbox"/> 65 public lands |
| <input type="checkbox"/> 10 arts & humanities | <input type="checkbox"/> 38 gambling | <input type="checkbox"/> 66 purchasing |
| <input type="checkbox"/> 11 business & commerce | <input type="checkbox"/> 39 handicapped persons | <input type="checkbox"/> 67 redistricting |
| <input type="checkbox"/> 12 cemeteries | <input checked="" type="checkbox"/> 40 health & health care | <input type="checkbox"/> 68 religion |
| <input type="checkbox"/> 13 charitable & nonprofit organizations | <input type="checkbox"/> 41 highways & roads | <input type="checkbox"/> 69 retirement systems |
| <input type="checkbox"/> 14 city government | <input type="checkbox"/> 42 historic preservation & museums | <input type="checkbox"/> 70 safety |
| <input type="checkbox"/> 15 civil remedies & liabilities | <input type="checkbox"/> 43 hospitals | <input type="checkbox"/> 71 special districts & authorities |
| <input type="checkbox"/> 16 coastal affairs & beaches | <input type="checkbox"/> 44 housing | <input type="checkbox"/> 72 state agencies, boards & commissions |
| <input type="checkbox"/> 17 common carriers | <input type="checkbox"/> 45 human services | <input type="checkbox"/> 73 state employees, officers & symbols |
| <input type="checkbox"/> 18 communication & press | <input type="checkbox"/> 46 insurance | <input type="checkbox"/> 74 state finances |
| <input type="checkbox"/> 19 consumer protection | <input type="checkbox"/> 47 labor | <input type="checkbox"/> 75 taxation |
| <input type="checkbox"/> 20 corporations & associations | <input type="checkbox"/> 48 law enforcement | <input type="checkbox"/> 76 tort reform |
| <input type="checkbox"/> 21 corrections | <input type="checkbox"/> 49 lawyers | <input type="checkbox"/> 77 tourism |
| <input type="checkbox"/> 22 county government | <input type="checkbox"/> 50 libraries | <input type="checkbox"/> 78 transportation |
| <input type="checkbox"/> 23 courts | <input type="checkbox"/> 51 malpractice-health care providers | <input type="checkbox"/> 79 utilities |
| <input type="checkbox"/> 24 crime | <input type="checkbox"/> 52 mental health & cognition | <input type="checkbox"/> 80 vehicles & traffic |
| <input type="checkbox"/> 25 criminal procedures | <input type="checkbox"/> 53 military & veterans | <input type="checkbox"/> 81 water |
| <input type="checkbox"/> 26 day care | <input type="checkbox"/> 54 mines & mineral resources | <input type="checkbox"/> 82 weapons |
| <input type="checkbox"/> 27 disaster preparedness & relief | <input type="checkbox"/> 55 minors | <input type="checkbox"/> 83 women's issues |
| <input type="checkbox"/> 28 economic & industrial development | <input type="checkbox"/> 56 nursing homes | |
| <input type="checkbox"/> 84 OTHER | | |

13 DOCKET NOS. OR OTHER DESIGNATION

- not applicable
 additional pages

DESIGNATION

AGENCY

DESIGNATION

AGENCY

DESIGNATION

AGENCY

GO TO SCHEDULE B

**AMENDMENT: EMPLOYER / CLIENT
PART 1 - GENERAL INFORMATION**

**FORM AREG
SCHEDULE A PG 1**

Use the Form AREG Instruction Guide for assistance in filling out Schedule A Part 1.

1 PAGE #
Sch: 1/1 Rpt: 36/76

2 REGISTRANT NAME	DeWitt, Cathy S. (Ms.)				
3 EMPLOYER / CLIENT NAME	One Call Corporation				
4 EMPLOYER / CLIENT MAILING ADDRESS	ADDRESS / P.O. BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE
	841 Prudential Drive				
	Suite 204				
	Jacksonville, FL 32207				

PART 2 - COMPENSATION

1 LEVEL OF COMPENSATION FOR LOBBYING	Less than \$18,890				
2 TYPE OF COMPENSATION BEING REPORTED	<input type="checkbox"/> PAID	<input type="checkbox"/> EARNED (but not received)	<input checked="" type="checkbox"/> PROSPECTIVE		
3 INDIVIDUAL REPORTING COMPENSATION AND/OR REIMBURSEMENT FOR ENTITY	<input type="checkbox"/> YES	NAME OF ENTITY	_____		
		ADDRESS OF ENTITY	_____		
	<input checked="" type="checkbox"/> NO	PHONE NO. OF ENTITY	_____		

PART 3 - ORGANIZATIONAL INFORMATION

1 IS THE EMPLOYER/CLIENT AN ENTITY OR AN INDIVIDUAL?	<input checked="" type="checkbox"/> ENTITY	<input type="checkbox"/> INDIVIDUAL (Complete PART 4 of SCHEDULE A)
2 IS THE EMPLOYER/CLIENT A CORPORATION?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO (Complete PART 3(a) of SCHEDULE A)
3 ARE THE SHARES OF THE CORPORATION PUBLICLY TRADED?	<input type="checkbox"/> YES (Complete PART 4 of SCHEDULE A)	<input checked="" type="checkbox"/> NO (Complete PART 3(b) of SCHEDULE A)
4 IS THE CLIENT A STATE AGENCY THAT PAYS YOU A SALES COMMISSION OR SUCH FEE?	<input type="checkbox"/> YES (Complete PART 5 of SCHEDULE A)	<input checked="" type="checkbox"/> NO

AMENDMENT: EMPLOYER / CLIENT
Part 3(b) - CORPORATION NOT PUBLICLY TRADED

FORM AREG
SCHEDULE A PG 3

Complete PART 3(b) only if the employer/client covered by this SCHEDULE A is a corporation whose shares are not publicly traded. Attach additional copies of this form as needed.

PAGE #
 Sch: 1/2 Rpt: 37/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 One Call Corporation

1 CORPORATE SHAREHOLDERS

NUMBER OF SHAREHOLDERS
N/A

2 CORPORATE OFFICERS AND BOARD MEMBERS

LAST; SUFFIX; FIRST; TITLE
 Colsen, Linda

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 841 Prudential Drive
 Suite 204
 Jacksonville, FL 32207

additional pages

LAST; SUFFIX; FIRST; TITLE
 Davis, Steven

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 841 Prudential Drive
 Suite 204
 Jacksonville, FL 32207

LAST; SUFFIX; FIRST; TITLE
 Krueger, Jay

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 841 Prudential Drive
 Suite 204
 Jacksonville, FL 32207

LAST; SUFFIX; FIRST; TITLE
 Onion, Patty

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 841 Prudential Drive
 Suite 204
 Jacksonville, FL 32207

3 CORPORATE OWNERSHIP/ HOLDINGS

LAST; SUFFIX; FIRST; TITLE

PERSONS OWNING 10% OR MORE SHARES

LAST; SUFFIX; FIRST; TITLE

LAST; SUFFIX; FIRST; TITLE

not applicable

LAST; SUFFIX; FIRST; TITLE

additional pages

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 3(b) - CORPORATION NOT PUBLICLY TRADED

FORM AREG
SCHEDULE A PG 3

Complete PART 3(b) only if the employer/client covered by this SCHEDULE A is a corporation whose shares are not publicly traded. Attach additional copies of this form as needed.

PAGE #
 Sch: 2/2 Rpt: 38/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 One Call Corporation

1 CORPORATE SHAREHOLDERS

NUMBER OF SHAREHOLDERS
N/A

2 CORPORATE OFFICERS AND BOARD MEMBERS

LAST; SUFFIX; FIRST; TITLE
 Pensotti, Federico

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 841 Prudential Drive
 Suite 204
 Jacksonville, FL 32207

additional pages

LAST; SUFFIX; FIRST; TITLE
 Taha, Omar

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 841 Prudential Drive
 Suite 204
 Jacksonville, FL 32207

LAST; SUFFIX; FIRST; TITLE
 Warsop III, Thomas (CEO)

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 841 Prudential Drive
 Suite 204
 Jacksonville, FL 32207

LAST; SUFFIX; FIRST; TITLE

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE

3 CORPORATE OWNERSHIP/ HOLDINGS

LAST; SUFFIX; FIRST; TITLE

PERSONS OWNING 10% OR MORE SHARES

LAST; SUFFIX; FIRST; TITLE

not applicable

LAST; SUFFIX; FIRST; TITLE

additional pages

LAST; SUFFIX; FIRST; TITLE

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 4 - LOBBYING SUBJECT MATTER

FORM AREG
SCHEDULE A PG 4

Use the FORM AREG INSTRUCTION GUIDE for assistance in filling out this form

Page #
 Sch: 1/1 Rpt: 39/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 One Call Corporation

1 SUBJECT MATTER

SUBJECT MATTER CATEGORIES

- | | | |
|------------------------------------------------------------------|---------------------------------------------------------------|------------------------------------------------------------------|
| <input type="checkbox"/> 1 abortion | <input type="checkbox"/> 29 education | <input type="checkbox"/> 57 occupational regulation |
| <input type="checkbox"/> 2 aeronautics | <input type="checkbox"/> 30 elections | <input type="checkbox"/> 58 oil & gas |
| <input type="checkbox"/> 3 aging | <input type="checkbox"/> 31 energy | <input type="checkbox"/> 59 open records & open meetings |
| <input type="checkbox"/> 4 agriculture | <input type="checkbox"/> 32 environment | <input type="checkbox"/> 60 parks & wildlife |
| <input type="checkbox"/> 5 alcoholic beverage regulation | <input type="checkbox"/> 33 ethics | <input type="checkbox"/> 61 political subdivisions |
| <input type="checkbox"/> 6 alcoholism & drug abuse | <input type="checkbox"/> 34 family issues | <input type="checkbox"/> 62 probate |
| <input type="checkbox"/> 7 aliens | <input type="checkbox"/> 35 fees & other non-tax revenue | <input type="checkbox"/> 63 product liability |
| <input type="checkbox"/> 8 amusements, games, sports | <input type="checkbox"/> 36 financial institutions | <input type="checkbox"/> 64 property interests |
| <input type="checkbox"/> 9 animals | <input type="checkbox"/> 37 fire fighters & police | <input type="checkbox"/> 65 public lands |
| <input type="checkbox"/> 10 arts & humanities | <input type="checkbox"/> 38 gambling | <input type="checkbox"/> 66 purchasing |
| <input type="checkbox"/> 11 business & commerce | <input type="checkbox"/> 39 handicapped persons | <input type="checkbox"/> 67 redistricting |
| <input type="checkbox"/> 12 cemeteries | <input checked="" type="checkbox"/> 40 health & health care | <input type="checkbox"/> 68 religion |
| <input type="checkbox"/> 13 charitable & nonprofit organizations | <input type="checkbox"/> 41 highways & roads | <input type="checkbox"/> 69 retirement systems |
| <input type="checkbox"/> 14 city government | <input type="checkbox"/> 42 historic preservation & museums | <input type="checkbox"/> 70 safety |
| <input type="checkbox"/> 15 civil remedies & liabilities | <input type="checkbox"/> 43 hospitals | <input type="checkbox"/> 71 special districts & authorities |
| <input type="checkbox"/> 16 coastal affairs & beaches | <input type="checkbox"/> 44 housing | <input type="checkbox"/> 72 state agencies, boards & commissions |
| <input type="checkbox"/> 17 common carriers | <input type="checkbox"/> 45 human services | <input type="checkbox"/> 73 state employees, officers & symbols |
| <input type="checkbox"/> 18 communication & press | <input type="checkbox"/> 46 insurance | <input type="checkbox"/> 74 state finances |
| <input type="checkbox"/> 19 consumer protection | <input type="checkbox"/> 47 labor | <input type="checkbox"/> 75 taxation |
| <input type="checkbox"/> 20 corporations & associations | <input type="checkbox"/> 48 law enforcement | <input type="checkbox"/> 76 tort reform |
| <input type="checkbox"/> 21 corrections | <input type="checkbox"/> 49 lawyers | <input type="checkbox"/> 77 tourism |
| <input type="checkbox"/> 22 county government | <input type="checkbox"/> 50 libraries | <input checked="" type="checkbox"/> 78 transportation |
| <input type="checkbox"/> 23 courts | <input type="checkbox"/> 51 malpractice-health care providers | <input type="checkbox"/> 79 utilities |
| <input type="checkbox"/> 24 crime | <input type="checkbox"/> 52 mental health & cognition | <input type="checkbox"/> 80 vehicles & traffic |
| <input type="checkbox"/> 25 criminal procedures | <input type="checkbox"/> 53 military & veterans | <input type="checkbox"/> 81 water |
| <input type="checkbox"/> 26 day care | <input type="checkbox"/> 54 mines & mineral resources | <input type="checkbox"/> 82 weapons |
| <input type="checkbox"/> 27 disaster preparedness & relief | <input type="checkbox"/> 55 minors | <input type="checkbox"/> 83 women's issues |
| <input type="checkbox"/> 28 economic & industrial development | <input type="checkbox"/> 56 nursing homes | |
| <input type="checkbox"/> 84 OTHER | | |

13 DOCKET NOS. OR OTHER DESIGNATION

- not applicable
 additional pages

DESIGNATION	AGENCY
DESIGNATION	AGENCY
DESIGNATION	AGENCY

GO TO SCHEDULE B

**AMENDMENT: EMPLOYER / CLIENT
PART 1 - GENERAL INFORMATION**

**FORM AREG
SCHEDULE A PG 1**

Use the Form AREG Instruction Guide for assistance in filling out Schedule A Part 1.

1 PAGE #
Sch: 1/1 Rpt: 40/76

2 REGISTRANT NAME	DeWitt, Cathy S. (Ms.)				
3 EMPLOYER / CLIENT NAME	Red Bull North America				
4 EMPLOYER / CLIENT MAILING ADDRESS	ADDRESS / P.O. BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE
	1740 Stewart Street				
	Santa Monica, CA 90404				

PART 2 - COMPENSATION

1 LEVEL OF COMPENSATION FOR LOBBYING	At least \$18,890 but less than \$47,219.99				
2 TYPE OF COMPENSATION BEING REPORTED	<input type="checkbox"/> PAID	<input type="checkbox"/> EARNED (but not received)	<input checked="" type="checkbox"/> PROSPECTIVE		
3 INDIVIDUAL REPORTING COMPENSATION AND/OR REIMBURSEMENT FOR ENTITY	<input type="checkbox"/> YES	NAME OF ENTITY	_____		
		ADDRESS OF ENTITY	_____		
	<input checked="" type="checkbox"/> NO	PHONE NO. OF ENTITY	_____		

PART 3 - ORGANIZATIONAL INFORMATION

1 IS THE EMPLOYER/CLIENT AN ENTITY OR AN INDIVIDUAL?	<input checked="" type="checkbox"/> ENTITY	<input type="checkbox"/> INDIVIDUAL (Complete PART 4 of SCHEDULE A)
2 IS THE EMPLOYER/CLIENT A CORPORATION?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO (Complete PART 3(a) of SCHEDULE A)
3 ARE THE SHARES OF THE CORPORATION PUBLICLY TRADED?	<input type="checkbox"/> YES (Complete PART 4 of SCHEDULE A)	<input checked="" type="checkbox"/> NO (Complete PART 3(b) of SCHEDULE A)
4 IS THE CLIENT A STATE AGENCY THAT PAYS YOU A SALES COMMISSION OR SUCH FEE?	<input type="checkbox"/> YES (Complete PART 5 of SCHEDULE A)	<input checked="" type="checkbox"/> NO

AMENDMENT: EMPLOYER / CLIENT
Part 3(b) - CORPORATION NOT PUBLICLY TRADED

FORM AREG
SCHEDULE A PG 3

Complete PART 3(b) only if the employer/client covered by this SCHEDULE A is a corporation whose shares are not publicly traded. Attach additional copies of this form as needed.

PAGE #
 Sch: 1/9 Rpt: 41/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 Red Bull North America

1 CORPORATE SHAREHOLDERS

NUMBER OF SHAREHOLDERS
N/A

2 CORPORATE OFFICERS AND BOARD MEMBERS

LAST; SUFFIX; FIRST; TITLE
 Arndt, Thomas

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 1740 Stewart Street
 San Monica, CA 90404

additional pages

LAST; SUFFIX; FIRST; TITLE
 Beneke, Devon

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 1740 Stewart Street
 San Monica, CA 90404

LAST; SUFFIX; FIRST; TITLE
 Bradfield, Scott

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 1740 Stewart Street
 San Monica, CA 90404

LAST; SUFFIX; FIRST; TITLE
 Conway, Ryan

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 1740 Stewart Street
 San Monica, CA 90404

3 CORPORATE OWNERSHIP/ HOLDINGS

LAST; SUFFIX; FIRST; TITLE

PERSONS OWNING 10% OR MORE SHARES

LAST; SUFFIX; FIRST; TITLE

LAST; SUFFIX; FIRST; TITLE

not applicable

LAST; SUFFIX; FIRST; TITLE

additional pages

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 3(b) - CORPORATION NOT PUBLICLY TRADED

FORM AREG
SCHEDULE A PG 3

Complete PART 3(b) only if the employer/client covered by this SCHEDULE A is a corporation whose shares are not publicly traded. Attach additional copies of this form as needed.

PAGE #
 Sch: 2/9 Rpt: 42/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 Red Bull North America

1 CORPORATE SHAREHOLDERS	NUMBER OF SHAREHOLDERS N/A
2 CORPORATE OFFICERS AND BOARD MEMBERS <input checked="" type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE Costa, Amy
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1740 Stewart Street San Monica, CA 90404
	LAST; SUFFIX; FIRST; TITLE Dickson, Alastair
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1740 Stewart Street San Monica, CA 90404
	LAST; SUFFIX; FIRST; TITLE Eggert, Sean
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1740 Stewart Street San Monica, CA 90404
	LAST; SUFFIX; FIRST; TITLE Ferguson, Curtis ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1740 Stewart Street San Monica, CA 90404
3 CORPORATE OWNERSHIP/ HOLDINGS PERSONS OWNING 10% OR MORE SHARES <input checked="" type="checkbox"/> not applicable <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 3(b) - CORPORATION NOT PUBLICLY TRADED

FORM AREG
SCHEDULE A PG 3

Complete PART 3(b) only if the employer/client covered by this SCHEDULE A is a corporation whose shares are not publicly traded. Attach additional copies of this form as needed.

PAGE #
 Sch: 3/9 Rpt: 43/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 Red Bull North America

1 CORPORATE SHAREHOLDERS	NUMBER OF SHAREHOLDERS N/A
2 CORPORATE OFFICERS AND BOARD MEMBERS <input checked="" type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE Feuerstein, Andy
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1740 Stewart Street San Monica, CA 90404
	LAST; SUFFIX; FIRST; TITLE Goluboff, Trent
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1740 Stewart Street San Monica, CA 90404
	LAST; SUFFIX; FIRST; TITLE Guarino, Fredo
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1740 Stewart Street San Monica, CA 90404
	LAST; SUFFIX; FIRST; TITLE Hardy, Gina ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1740 Stewart Street San Monica, CA 90404
3 CORPORATE OWNERSHIP/ HOLDINGS PERSONS OWNING 10% OR MORE SHARES <input checked="" type="checkbox"/> not applicable <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 3(b) - CORPORATION NOT PUBLICLY TRADED

FORM AREG
SCHEDULE A PG 3

Complete PART 3(b) only if the employer/client covered by this SCHEDULE A is a corporation whose shares are not publicly traded. Attach additional copies of this form as needed.

PAGE #
 Sch: 4/9 Rpt: 44/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 Red Bull North America

1 CORPORATE SHAREHOLDERS

NUMBER OF SHAREHOLDERS
N/A

2 CORPORATE OFFICERS AND BOARD MEMBERS

LAST; SUFFIX; FIRST; TITLE
 Holzmann, Oliver

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 1740 Stewart Street
 San Monica, CA 90404

additional pages

LAST; SUFFIX; FIRST; TITLE
 Kahler, Todd

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 1740 Stewart Street
 San Monica, CA 90404

LAST; SUFFIX; FIRST; TITLE
 Kuri, J

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 1740 Stewart Street
 San Monica, CA 90404

LAST; SUFFIX; FIRST; TITLE
 Kwon, Peter

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 1740 Stewart Street
 San Monica, CA 90404

3 CORPORATE OWNERSHIP/ HOLDINGS

LAST; SUFFIX; FIRST; TITLE

PERSONS OWNING 10% OR MORE SHARES

LAST; SUFFIX; FIRST; TITLE

LAST; SUFFIX; FIRST; TITLE

not applicable

LAST; SUFFIX; FIRST; TITLE

additional pages

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 3(b) - CORPORATION NOT PUBLICLY TRADED

FORM AREG
SCHEDULE A PG 3

Complete PART 3(b) only if the employer/client covered by this SCHEDULE A is a corporation whose shares are not publicly traded. Attach additional copies of this form as needed.

PAGE #
 Sch: 5/9 Rpt: 45/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 Red Bull North America

1 CORPORATE SHAREHOLDERS	NUMBER OF SHAREHOLDERS N/A
2 CORPORATE OFFICERS AND BOARD MEMBERS <input checked="" type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE Laratta, Edward
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1740 Stewart Street San Monica, CA 90404
	LAST; SUFFIX; FIRST; TITLE Mateschitz, Dietrich
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1740 Stewart Street San Monica, CA 90404
	LAST; SUFFIX; FIRST; TITLE Mueller, Micha
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1740 Stewart Street San Monica, CA 90404
	LAST; SUFFIX; FIRST; TITLE Mulderink, Mike ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1740 Stewart Street San Monica, CA 90404
3 CORPORATE OWNERSHIP/ HOLDINGS PERSONS OWNING 10% OR MORE SHARES <input checked="" type="checkbox"/> not applicable <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 3(b) - CORPORATION NOT PUBLICLY TRADED

FORM AREG
SCHEDULE A PG 3

Complete PART 3(b) only if the employer/client covered by this SCHEDULE A is a corporation whose shares are not publicly traded. Attach additional copies of this form as needed.

PAGE #
 Sch: 6/9 Rpt: 46/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 Red Bull North America

1 CORPORATE SHAREHOLDERS

NUMBER OF SHAREHOLDERS
N/A

2 CORPORATE OFFICERS AND BOARD MEMBERS

LAST; SUFFIX; FIRST; TITLE
 Nistico, Robert

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 1740 Stewart Street
 San Monica, CA 90404

additional pages

LAST; SUFFIX; FIRST; TITLE
 Nowakowski, Tomasz

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 1740 Stewart Street
 San Monica, CA 90404

LAST; SUFFIX; FIRST; TITLE
 Oghoghomeh, Akerho

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 1740 Stewart Street
 San Monica, CA 90404

LAST; SUFFIX; FIRST; TITLE
 Ponder, Tom

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 1740 Stewart Street
 San Monica, CA 90404

3 CORPORATE OWNERSHIP/ HOLDINGS

LAST; SUFFIX; FIRST; TITLE

PERSONS OWNING 10% OR MORE SHARES

LAST; SUFFIX; FIRST; TITLE

LAST; SUFFIX; FIRST; TITLE

not applicable

additional pages

LAST; SUFFIX; FIRST; TITLE

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 3(b) - CORPORATION NOT PUBLICLY TRADED

FORM AREG
SCHEDULE A PG 3

Complete PART 3(b) only if the employer/client covered by this SCHEDULE A is a corporation whose shares are not publicly traded. Attach additional copies of this form as needed.

PAGE #
 Sch: 7/9 Rpt: 47/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 Red Bull North America

1 CORPORATE SHAREHOLDERS

NUMBER OF SHAREHOLDERS
N/A

2 CORPORATE OFFICERS AND BOARD MEMBERS

LAST; SUFFIX; FIRST; TITLE
 Rappaport, Mark

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 1740 Stewart Street
 San Monica, CA 90404

additional pages

LAST; SUFFIX; FIRST; TITLE
 Reynolds, David

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 1740 Stewart Street
 San Monica, CA 90404

LAST; SUFFIX; FIRST; TITLE
 Ritterbush, Dave

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 1740 Stewart Street
 San Monica, CA 90404

LAST; SUFFIX; FIRST; TITLE
 Robbins, Greg

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 1740 Stewart Street
 San Monica, CA 90404

3 CORPORATE OWNERSHIP/ HOLDINGS

LAST; SUFFIX; FIRST; TITLE

PERSONS OWNING 10% OR MORE SHARES

LAST; SUFFIX; FIRST; TITLE

LAST; SUFFIX; FIRST; TITLE

not applicable

additional pages

LAST; SUFFIX; FIRST; TITLE

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 3(b) - CORPORATION NOT PUBLICLY TRADED

FORM AREG
SCHEDULE A PG 3

Complete PART 3(b) only if the employer/client covered by this SCHEDULE A is a corporation whose shares are not publicly traded. Attach additional copies of this form as needed.

PAGE #
 Sch: 8/9 Rpt: 48/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 Red Bull North America

1 CORPORATE SHAREHOLDERS

NUMBER OF SHAREHOLDERS
N/A

2 CORPORATE OFFICERS AND BOARD MEMBERS

LAST; SUFFIX; FIRST; TITLE
 Showalter, John

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 1740 Stewart Street
 San Monica, CA 90404

additional pages

LAST; SUFFIX; FIRST; TITLE
 Steiner, Guenther

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 1740 Stewart Street
 San Monica, CA 90404

LAST; SUFFIX; FIRST; TITLE
 Trombetta, Chris

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 1740 Stewart Street
 San Monica, CA 90404

LAST; SUFFIX; FIRST; TITLE
 Turner, Ken

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 1740 Stewart Street
 San Monica, CA 90404

3 CORPORATE OWNERSHIP/ HOLDINGS

LAST; SUFFIX; FIRST; TITLE

PERSONS OWNING 10% OR MORE SHARES

LAST; SUFFIX; FIRST; TITLE

LAST; SUFFIX; FIRST; TITLE

not applicable

LAST; SUFFIX; FIRST; TITLE

additional pages

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 3(b) - CORPORATION NOT PUBLICLY TRADED

FORM AREG
SCHEDULE A PG 3

Complete PART 3(b) only if the employer/client covered by this SCHEDULE A is a corporation whose shares are not publicly traded. Attach additional copies of this form as needed.

PAGE #
 Sch: 9/9 Rpt: 49/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 Red Bull North America

1 CORPORATE SHAREHOLDERS

NUMBER OF SHAREHOLDERS
N/A

2 CORPORATE OFFICERS AND BOARD MEMBERS

LAST; SUFFIX; FIRST; TITLE
 Waters, Joe

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 1740 Stewart Street
 San Monica, CA 90404

additional pages

LAST; SUFFIX; FIRST; TITLE

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE

LAST; SUFFIX; FIRST; TITLE

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE

LAST; SUFFIX; FIRST; TITLE

ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE

3 CORPORATE OWNERSHIP/ HOLDINGS

LAST; SUFFIX; FIRST; TITLE

PERSONS OWNING 10% OR MORE SHARES

LAST; SUFFIX; FIRST; TITLE

not applicable

LAST; SUFFIX; FIRST; TITLE

additional pages

LAST; SUFFIX; FIRST; TITLE

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 4 - LOBBYING SUBJECT MATTER

FORM AREG
SCHEDULE A PG 4

Use the FORM AREG INSTRUCTION GUIDE for assistance in filling out this form

Page #
 Sch: 1/1 Rpt: 50/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 Red Bull North America

1 SUBJECT MATTER

SUBJECT MATTER CATEGORIES

- | | | |
|------------------------------------------------------------------|---------------------------------------------------------------|------------------------------------------------------------------|
| <input type="checkbox"/> 1 abortion | <input type="checkbox"/> 29 education | <input type="checkbox"/> 57 occupational regulation |
| <input type="checkbox"/> 2 aeronautics | <input type="checkbox"/> 30 elections | <input type="checkbox"/> 58 oil & gas |
| <input type="checkbox"/> 3 aging | <input type="checkbox"/> 31 energy | <input type="checkbox"/> 59 open records & open meetings |
| <input type="checkbox"/> 4 agriculture | <input type="checkbox"/> 32 environment | <input type="checkbox"/> 60 parks & wildlife |
| <input type="checkbox"/> 5 alcoholic beverage regulation | <input type="checkbox"/> 33 ethics | <input type="checkbox"/> 61 political subdivisions |
| <input type="checkbox"/> 6 alcoholism & drug abuse | <input type="checkbox"/> 34 family issues | <input type="checkbox"/> 62 probate |
| <input type="checkbox"/> 7 aliens | <input type="checkbox"/> 35 fees & other non-tax revenue | <input type="checkbox"/> 63 product liability |
| <input type="checkbox"/> 8 amusements, games, sports | <input type="checkbox"/> 36 financial institutions | <input type="checkbox"/> 64 property interests |
| <input type="checkbox"/> 9 animals | <input type="checkbox"/> 37 fire fighters & police | <input type="checkbox"/> 65 public lands |
| <input type="checkbox"/> 10 arts & humanities | <input type="checkbox"/> 38 gambling | <input type="checkbox"/> 66 purchasing |
| <input checked="" type="checkbox"/> 11 business & commerce | <input type="checkbox"/> 39 handicapped persons | <input type="checkbox"/> 67 redistricting |
| <input type="checkbox"/> 12 cemeteries | <input checked="" type="checkbox"/> 40 health & health care | <input type="checkbox"/> 68 religion |
| <input type="checkbox"/> 13 charitable & nonprofit organizations | <input type="checkbox"/> 41 highways & roads | <input type="checkbox"/> 69 retirement systems |
| <input type="checkbox"/> 14 city government | <input type="checkbox"/> 42 historic preservation & museums | <input type="checkbox"/> 70 safety |
| <input type="checkbox"/> 15 civil remedies & liabilities | <input type="checkbox"/> 43 hospitals | <input type="checkbox"/> 71 special districts & authorities |
| <input type="checkbox"/> 16 coastal affairs & beaches | <input type="checkbox"/> 44 housing | <input type="checkbox"/> 72 state agencies, boards & commissions |
| <input type="checkbox"/> 17 common carriers | <input checked="" type="checkbox"/> 45 human services | <input type="checkbox"/> 73 state employees, officers & symbols |
| <input type="checkbox"/> 18 communication & press | <input type="checkbox"/> 46 insurance | <input type="checkbox"/> 74 state finances |
| <input checked="" type="checkbox"/> 19 consumer protection | <input type="checkbox"/> 47 labor | <input checked="" type="checkbox"/> 75 taxation |
| <input type="checkbox"/> 20 corporations & associations | <input type="checkbox"/> 48 law enforcement | <input type="checkbox"/> 76 tort reform |
| <input type="checkbox"/> 21 corrections | <input type="checkbox"/> 49 lawyers | <input type="checkbox"/> 77 tourism |
| <input type="checkbox"/> 22 county government | <input type="checkbox"/> 50 libraries | <input type="checkbox"/> 78 transportation |
| <input type="checkbox"/> 23 courts | <input type="checkbox"/> 51 malpractice-health care providers | <input type="checkbox"/> 79 utilities |
| <input type="checkbox"/> 24 crime | <input type="checkbox"/> 52 mental health & cognition | <input type="checkbox"/> 80 vehicles & traffic |
| <input type="checkbox"/> 25 criminal procedures | <input type="checkbox"/> 53 military & veterans | <input type="checkbox"/> 81 water |
| <input type="checkbox"/> 26 day care | <input type="checkbox"/> 54 mines & mineral resources | <input type="checkbox"/> 82 weapons |
| <input type="checkbox"/> 27 disaster preparedness & relief | <input type="checkbox"/> 55 minors | <input type="checkbox"/> 83 women's issues |
| <input type="checkbox"/> 28 economic & industrial development | <input type="checkbox"/> 56 nursing homes | |
| <input type="checkbox"/> 84 OTHER | | |

13 DOCKET NOS. OR OTHER DESIGNATION

- not applicable
 additional pages

DESIGNATION

AGENCY

DESIGNATION

AGENCY

DESIGNATION

AGENCY

GO TO SCHEDULE B

**AMENDMENT: EMPLOYER / CLIENT
PART 1 - GENERAL INFORMATION**

**FORM AREG
SCHEDULE A PG 1**

Use the Form AREG Instruction Guide for assistance in filling out Schedule A Part 1.

1 PAGE #
Sch: 1/1 Rpt: 51/76

2 REGISTRANT NAME	DeWitt, Cathy S. (Ms.)				
3 EMPLOYER / CLIENT NAME	San Antonio Water Systems				
4 EMPLOYER / CLIENT MAILING ADDRESS	ADDRESS / P.O. BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE
	2800 US Hwy 281				
	San Antonio, TX 78212				

PART 2 - COMPENSATION

1 LEVEL OF COMPENSATION FOR LOBBYING	At least \$47,220 but less than \$94,439.99				
2 TYPE OF COMPENSATION BEING REPORTED	<input type="checkbox"/> PAID	<input type="checkbox"/> EARNED (but not received)	<input checked="" type="checkbox"/> PROSPECTIVE		
3 INDIVIDUAL REPORTING COMPENSATION AND/OR REIMBURSEMENT FOR ENTITY	<input type="checkbox"/> YES	NAME OF ENTITY	_____		
		ADDRESS OF ENTITY	_____		
	<input checked="" type="checkbox"/> NO	PHONE NO. OF ENTITY	_____		

PART 3 - ORGANIZATIONAL INFORMATION

1 IS THE EMPLOYER/CLIENT AN ENTITY OR AN INDIVIDUAL?	<input checked="" type="checkbox"/> ENTITY	<input type="checkbox"/> INDIVIDUAL (Complete PART 4 of SCHEDULE A)
2 IS THE EMPLOYER/CLIENT A CORPORATION?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO (Complete PART 3(a) of SCHEDULE A)
3 ARE THE SHARES OF THE CORPORATION PUBLICLY TRADED?	<input type="checkbox"/> YES (Complete PART 4 of SCHEDULE A)	<input checked="" type="checkbox"/> NO (Complete PART 3(b) of SCHEDULE A)
4 IS THE CLIENT A STATE AGENCY THAT PAYS YOU A SALES COMMISSION OR SUCH FEE?	<input type="checkbox"/> YES (Complete PART 5 of SCHEDULE A)	<input checked="" type="checkbox"/> NO

AMENDMENT: EMPLOYER / CLIENT
Part 3(b) - CORPORATION NOT PUBLICLY TRADED

FORM AREG
SCHEDULE A PG 3

Complete PART 3(b) only if the employer/client covered by this SCHEDULE A is a corporation whose shares are not publicly traded. Attach additional copies of this form as needed.

PAGE #
 Sch: 1/2 Rpt: 52/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 San Antonio Water Systems

1 CORPORATE SHAREHOLDERS	NUMBER OF SHAREHOLDERS N/A
2 CORPORATE OFFICERS AND BOARD MEMBERS <input checked="" type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE Belmares, Ed
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2800 US Hwy 281 San Antonio, TX 78212
	LAST; SUFFIX; FIRST; TITLE Hardberger, Amy
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2800 US Hwy 281 San Antonio, TX 78212
	LAST; SUFFIX; FIRST; TITLE Jamison, Jelynne
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2800 US Hwy 281 San Antonio, TX 78212
	LAST; SUFFIX; FIRST; TITLE McGee, David ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2800 US Hwy 281 San Antonio, TX 78212
3 CORPORATE OWNERSHIP/ HOLDINGS PERSONS OWNING 10% OR MORE SHARES <input checked="" type="checkbox"/> not applicable <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 3(b) - CORPORATION NOT PUBLICLY TRADED

FORM AREG
SCHEDULE A PG 3

Complete PART 3(b) only if the employer/client covered by this SCHEDULE A is a corporation whose shares are not publicly traded. Attach additional copies of this form as needed.

PAGE #
 Sch: 2/2 Rpt: 53/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 San Antonio Water Systems

1 CORPORATE SHAREHOLDERS	NUMBER OF SHAREHOLDERS N/A
2 CORPORATE OFFICERS AND BOARD MEMBERS <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE Nirenberg, Ron
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2800 US Hwy 281 San Antonio, TX 78212
	LAST; SUFFIX; FIRST; TITLE Parra, Eduardo
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2800 US Hwy 281 San Antonio, TX 78212
	LAST; SUFFIX; FIRST; TITLE Reyna, Marilu
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2800 US Hwy 281 San Antonio, TX 78212
	LAST; SUFFIX; FIRST; TITLE ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
3 CORPORATE OWNERSHIP/ HOLDINGS PERSONS OWNING 10% OR MORE SHARES <input checked="" type="checkbox"/> not applicable <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 4 - LOBBYING SUBJECT MATTER

FORM AREG
SCHEDULE A PG 4

Use the FORM AREG INSTRUCTION GUIDE for assistance in filling out this form

Page #
 Sch: 1/1 Rpt: 54/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 San Antonio Water Systems

1 SUBJECT MATTER

SUBJECT MATTER CATEGORIES

- | | | |
|--------------------------------------------------------------------------|---------------------------------------------------------------------|-----------------------------------------------------------------------------|
| <input type="checkbox"/> 1 abortion | <input type="checkbox"/> 29 education | <input type="checkbox"/> 57 occupational regulation |
| <input type="checkbox"/> 2 aeronautics | <input type="checkbox"/> 30 elections | <input type="checkbox"/> 58 oil & gas |
| <input type="checkbox"/> 3 aging | <input type="checkbox"/> 31 energy | <input type="checkbox"/> 59 open records & open meetings |
| <input type="checkbox"/> 4 agriculture | <input checked="" type="checkbox"/> 32 environment | <input type="checkbox"/> 60 parks & wildlife |
| <input type="checkbox"/> 5 alcoholic beverage regulation | <input type="checkbox"/> 33 ethics | <input type="checkbox"/> 61 political subdivisions |
| <input type="checkbox"/> 6 alcoholism & drug abuse | <input type="checkbox"/> 34 family issues | <input type="checkbox"/> 62 probate |
| <input type="checkbox"/> 7 aliens | <input checked="" type="checkbox"/> 35 fees & other non-tax revenue | <input type="checkbox"/> 63 product liability |
| <input type="checkbox"/> 8 amusements, games, sports | <input type="checkbox"/> 36 financial institutions | <input type="checkbox"/> 64 property interests |
| <input type="checkbox"/> 9 animals | <input type="checkbox"/> 37 fire fighters & police | <input type="checkbox"/> 65 public lands |
| <input type="checkbox"/> 10 arts & humanities | <input type="checkbox"/> 38 gambling | <input type="checkbox"/> 66 purchasing |
| <input checked="" type="checkbox"/> 11 business & commerce | <input type="checkbox"/> 39 handicapped persons | <input type="checkbox"/> 67 redistricting |
| <input type="checkbox"/> 12 cemeteries | <input type="checkbox"/> 40 health & health care | <input type="checkbox"/> 68 religion |
| <input type="checkbox"/> 13 charitable & nonprofit organizations | <input type="checkbox"/> 41 highways & roads | <input type="checkbox"/> 69 retirement systems |
| <input type="checkbox"/> 14 city government | <input type="checkbox"/> 42 historic preservation & museums | <input type="checkbox"/> 70 safety |
| <input type="checkbox"/> 15 civil remedies & liabilities | <input type="checkbox"/> 43 hospitals | <input checked="" type="checkbox"/> 71 special districts & authorities |
| <input type="checkbox"/> 16 coastal affairs & beaches | <input type="checkbox"/> 44 housing | <input checked="" type="checkbox"/> 72 state agencies, boards & commissions |
| <input type="checkbox"/> 17 common carriers | <input type="checkbox"/> 45 human services | <input type="checkbox"/> 73 state employees, officers & symbols |
| <input type="checkbox"/> 18 communication & press | <input type="checkbox"/> 46 insurance | <input type="checkbox"/> 74 state finances |
| <input type="checkbox"/> 19 consumer protection | <input type="checkbox"/> 47 labor | <input type="checkbox"/> 75 taxation |
| <input type="checkbox"/> 20 corporations & associations | <input type="checkbox"/> 48 law enforcement | <input type="checkbox"/> 76 tort reform |
| <input type="checkbox"/> 21 corrections | <input type="checkbox"/> 49 lawyers | <input type="checkbox"/> 77 tourism |
| <input type="checkbox"/> 22 county government | <input type="checkbox"/> 50 libraries | <input type="checkbox"/> 78 transportation |
| <input type="checkbox"/> 23 courts | <input type="checkbox"/> 51 malpractice-health care providers | <input checked="" type="checkbox"/> 79 utilities |
| <input type="checkbox"/> 24 crime | <input type="checkbox"/> 52 mental health & cognition | <input type="checkbox"/> 80 vehicles & traffic |
| <input type="checkbox"/> 25 criminal procedures | <input type="checkbox"/> 53 military & veterans | <input checked="" type="checkbox"/> 81 water |
| <input type="checkbox"/> 26 day care | <input type="checkbox"/> 54 mines & mineral resources | <input type="checkbox"/> 82 weapons |
| <input type="checkbox"/> 27 disaster preparedness & relief | <input type="checkbox"/> 55 minors | <input type="checkbox"/> 83 women's issues |
| <input checked="" type="checkbox"/> 28 economic & industrial development | <input type="checkbox"/> 56 nursing homes | |
| <input type="checkbox"/> 84 OTHER | | |

13 DOCKET NOS. OR OTHER DESIGNATION

- not applicable
 additional pages

DESIGNATION

AGENCY

DESIGNATION

AGENCY

DESIGNATION

AGENCY

GO TO SCHEDULE B

**AMENDMENT: EMPLOYER / CLIENT
PART 1 - GENERAL INFORMATION**

**FORM AREG
SCHEDULE A PG 1**

Use the Form AREG Instruction Guide for assistance in filling out Schedule A Part 1.

1 PAGE #
Sch: 1/1 Rpt: 55/76

2 REGISTRANT NAME	DeWitt, Cathy S. (Ms.)				
3 EMPLOYER / CLIENT NAME	Shadowsoft Inc.				
4 EMPLOYER / CLIENT MAILING ADDRESS	ADDRESS / P.O. BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE
	7750 North Macarthur Blvd.				
	Irving, TX 75063				

PART 2 - COMPENSATION

1 LEVEL OF COMPENSATION FOR LOBBYING	At least \$18,890 but less than \$47,219.99				
2 TYPE OF COMPENSATION BEING REPORTED	<input type="checkbox"/> PAID	<input type="checkbox"/> EARNED (but not received)	<input checked="" type="checkbox"/> PROSPECTIVE		
3 INDIVIDUAL REPORTING COMPENSATION AND/OR REIMBURSEMENT FOR ENTITY	<input type="checkbox"/> YES	NAME OF ENTITY	_____		
		ADDRESS OF ENTITY	_____		
	<input checked="" type="checkbox"/> NO	PHONE NO. OF ENTITY	_____		

PART 3 - ORGANIZATIONAL INFORMATION

1 IS THE EMPLOYER/CLIENT AN ENTITY OR AN INDIVIDUAL?	<input checked="" type="checkbox"/> ENTITY	<input type="checkbox"/> INDIVIDUAL (Complete PART 4 of SCHEDULE A)
2 IS THE EMPLOYER/CLIENT A CORPORATION?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO (Complete PART 3(a) of SCHEDULE A)
3 ARE THE SHARES OF THE CORPORATION PUBLICLY TRADED?	<input type="checkbox"/> YES (Complete PART 4 of SCHEDULE A)	<input checked="" type="checkbox"/> NO (Complete PART 3(b) of SCHEDULE A)
4 IS THE CLIENT A STATE AGENCY THAT PAYS YOU A SALES COMMISSION OR SUCH FEE?	<input type="checkbox"/> YES (Complete PART 5 of SCHEDULE A)	<input checked="" type="checkbox"/> NO

AMENDMENT: EMPLOYER / CLIENT
Part 3(b) - CORPORATION NOT PUBLICLY TRADED

FORM AREG
SCHEDULE A PG 3

Complete PART 3(b) only if the employer/client covered by this SCHEDULE A is a corporation whose shares are not publicly traded. Attach additional copies of this form as needed.

PAGE #
 Sch: 1/1 Rpt: 56/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 Shadowsoft Inc.

1 CORPORATE SHAREHOLDERS	NUMBER OF SHAREHOLDERS N/A
2 CORPORATE OFFICERS AND BOARD MEMBERS <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE Stringfellow, Bruce
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE 7750 North Macarthur Blvd. Irving, TX 75063
	LAST; SUFFIX; FIRST; TITLE
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
	LAST; SUFFIX; FIRST; TITLE
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
	LAST; SUFFIX; FIRST; TITLE
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE
3 CORPORATE OWNERSHIP/ HOLDINGS PERSONS OWNING 10% OR MORE SHARES <input checked="" type="checkbox"/> not applicable <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 4 - LOBBYING SUBJECT MATTER

FORM AREG
SCHEDULE A PG 4

Use the FORM AREG INSTRUCTION GUIDE for assistance in filling out this form

Page #
 Sch: 1/1 Rpt: 57/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 Shadowsoft Inc.

1 SUBJECT MATTER

SUBJECT MATTER CATEGORIES

- | | | |
|-------------------------------------------------------------------|---------------------------------------------------------------|-----------------------------------------------------------------------------|
| <input type="checkbox"/> 1 abortion | <input type="checkbox"/> 29 education | <input type="checkbox"/> 57 occupational regulation |
| <input type="checkbox"/> 2 aeronautics | <input type="checkbox"/> 30 elections | <input type="checkbox"/> 58 oil & gas |
| <input type="checkbox"/> 3 aging | <input type="checkbox"/> 31 energy | <input type="checkbox"/> 59 open records & open meetings |
| <input type="checkbox"/> 4 agriculture | <input type="checkbox"/> 32 environment | <input type="checkbox"/> 60 parks & wildlife |
| <input type="checkbox"/> 5 alcoholic beverage regulation | <input type="checkbox"/> 33 ethics | <input type="checkbox"/> 61 political subdivisions |
| <input type="checkbox"/> 6 alcoholism & drug abuse | <input type="checkbox"/> 34 family issues | <input type="checkbox"/> 62 probate |
| <input type="checkbox"/> 7 aliens | <input type="checkbox"/> 35 fees & other non-tax revenue | <input type="checkbox"/> 63 product liability |
| <input type="checkbox"/> 8 amusements, games, sports | <input type="checkbox"/> 36 financial institutions | <input type="checkbox"/> 64 property interests |
| <input type="checkbox"/> 9 animals | <input type="checkbox"/> 37 fire fighters & police | <input type="checkbox"/> 65 public lands |
| <input type="checkbox"/> 10 arts & humanities | <input type="checkbox"/> 38 gambling | <input type="checkbox"/> 66 purchasing |
| <input checked="" type="checkbox"/> 11 business & commerce | <input type="checkbox"/> 39 handicapped persons | <input type="checkbox"/> 67 redistricting |
| <input type="checkbox"/> 12 cemeteries | <input type="checkbox"/> 40 health & health care | <input type="checkbox"/> 68 religion |
| <input type="checkbox"/> 13 charitable & nonprofit organizations | <input type="checkbox"/> 41 highways & roads | <input type="checkbox"/> 69 retirement systems |
| <input type="checkbox"/> 14 city government | <input type="checkbox"/> 42 historic preservation & museums | <input type="checkbox"/> 70 safety |
| <input type="checkbox"/> 15 civil remedies & liabilities | <input type="checkbox"/> 43 hospitals | <input type="checkbox"/> 71 special districts & authorities |
| <input type="checkbox"/> 16 coastal affairs & beaches | <input type="checkbox"/> 44 housing | <input checked="" type="checkbox"/> 72 state agencies, boards & commissions |
| <input type="checkbox"/> 17 common carriers | <input type="checkbox"/> 45 human services | <input type="checkbox"/> 73 state employees, officers & symbols |
| <input type="checkbox"/> 18 communication & press | <input type="checkbox"/> 46 insurance | <input type="checkbox"/> 74 state finances |
| <input type="checkbox"/> 19 consumer protection | <input type="checkbox"/> 47 labor | <input type="checkbox"/> 75 taxation |
| <input type="checkbox"/> 20 corporations & associations | <input type="checkbox"/> 48 law enforcement | <input type="checkbox"/> 76 tort reform |
| <input type="checkbox"/> 21 corrections | <input type="checkbox"/> 49 lawyers | <input type="checkbox"/> 77 tourism |
| <input type="checkbox"/> 22 county government | <input type="checkbox"/> 50 libraries | <input type="checkbox"/> 78 transportation |
| <input type="checkbox"/> 23 courts | <input type="checkbox"/> 51 malpractice-health care providers | <input type="checkbox"/> 79 utilities |
| <input type="checkbox"/> 24 crime | <input type="checkbox"/> 52 mental health & cognition | <input type="checkbox"/> 80 vehicles & traffic |
| <input type="checkbox"/> 25 criminal procedures | <input type="checkbox"/> 53 military & veterans | <input type="checkbox"/> 81 water |
| <input type="checkbox"/> 26 day care | <input type="checkbox"/> 54 mines & mineral resources | <input type="checkbox"/> 82 weapons |
| <input type="checkbox"/> 27 disaster preparedness & relief | <input type="checkbox"/> 55 minors | <input type="checkbox"/> 83 women's issues |
| <input type="checkbox"/> 28 economic & industrial development | <input type="checkbox"/> 56 nursing homes | |
| <input checked="" type="checkbox"/> 84 OTHER Technology, database | | |

13 DOCKET NOS. OR OTHER DESIGNATION

- not applicable
 additional pages

DESIGNATION	AGENCY
DESIGNATION	AGENCY
DESIGNATION	AGENCY

GO TO SCHEDULE B

**AMENDMENT: EMPLOYER / CLIENT
PART 1 - GENERAL INFORMATION**

**FORM AREG
SCHEDULE A PG 1**

Use the Form AREG Instruction Guide for assistance in filling out Schedule A Part 1.

1 PAGE #
Sch: 1/1 Rpt: 58/76

2 REGISTRANT NAME	DeWitt, Cathy S. (Ms.)				
3 EMPLOYER / CLIENT NAME	Stericycle Inc.				
4 EMPLOYER / CLIENT MAILING ADDRESS	ADDRESS / P.O. BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE
	2355 Waukegan Rd				
	Bannockburn, IL 60015				

PART 2 - COMPENSATION

1 LEVEL OF COMPENSATION FOR LOBBYING	At least \$18,890 but less than \$47,219.99				
2 TYPE OF COMPENSATION BEING REPORTED	<input type="checkbox"/> PAID	<input type="checkbox"/> EARNED (but not received)	<input checked="" type="checkbox"/> PROSPECTIVE		
3 INDIVIDUAL REPORTING COMPENSATION AND/OR REIMBURSEMENT FOR ENTITY	<input type="checkbox"/> YES	NAME OF ENTITY	_____		
		ADDRESS OF ENTITY	_____		
	<input checked="" type="checkbox"/> NO	PHONE NO. OF ENTITY	_____		

PART 3 - ORGANIZATIONAL INFORMATION

1 IS THE EMPLOYER/CLIENT AN ENTITY OR AN INDIVIDUAL?	<input checked="" type="checkbox"/> ENTITY	<input type="checkbox"/> INDIVIDUAL (Complete PART 4 of SCHEDULE A)
2 IS THE EMPLOYER/CLIENT A CORPORATION?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO (Complete PART 3(a) of SCHEDULE A)
3 ARE THE SHARES OF THE CORPORATION PUBLICLY TRADED?	<input checked="" type="checkbox"/> YES (Complete PART 4 of SCHEDULE A)	<input type="checkbox"/> NO (Complete PART 3(b) of SCHEDULE A)
4 IS THE CLIENT A STATE AGENCY THAT PAYS YOU A SALES COMMISSION OR SUCH FEE?	<input type="checkbox"/> YES (Complete PART 5 of SCHEDULE A)	<input checked="" type="checkbox"/> NO

AMENDMENT: EMPLOYER / CLIENT
Part 4 - LOBBYING SUBJECT MATTER

FORM AREG
SCHEDULE A PG 4

Use the FORM AREG INSTRUCTION GUIDE for assistance in filling out this form

Page #
 Sch: 1/1 Rpt: 59/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 Stericycle Inc.

1 SUBJECT MATTER

SUBJECT MATTER CATEGORIES

- | | | |
|------------------------------------------------------------------|---------------------------------------------------------------|-----------------------------------------------------------------------------|
| <input type="checkbox"/> 1 abortion | <input type="checkbox"/> 29 education | <input type="checkbox"/> 57 occupational regulation |
| <input type="checkbox"/> 2 aeronautics | <input type="checkbox"/> 30 elections | <input type="checkbox"/> 58 oil & gas |
| <input type="checkbox"/> 3 aging | <input type="checkbox"/> 31 energy | <input type="checkbox"/> 59 open records & open meetings |
| <input type="checkbox"/> 4 agriculture | <input checked="" type="checkbox"/> 32 environment | <input type="checkbox"/> 60 parks & wildlife |
| <input type="checkbox"/> 5 alcoholic beverage regulation | <input type="checkbox"/> 33 ethics | <input type="checkbox"/> 61 political subdivisions |
| <input type="checkbox"/> 6 alcoholism & drug abuse | <input type="checkbox"/> 34 family issues | <input type="checkbox"/> 62 probate |
| <input type="checkbox"/> 7 aliens | <input type="checkbox"/> 35 fees & other non-tax revenue | <input type="checkbox"/> 63 product liability |
| <input type="checkbox"/> 8 amusements, games, sports | <input type="checkbox"/> 36 financial institutions | <input type="checkbox"/> 64 property interests |
| <input type="checkbox"/> 9 animals | <input type="checkbox"/> 37 fire fighters & police | <input type="checkbox"/> 65 public lands |
| <input type="checkbox"/> 10 arts & humanities | <input type="checkbox"/> 38 gambling | <input type="checkbox"/> 66 purchasing |
| <input checked="" type="checkbox"/> 11 business & commerce | <input type="checkbox"/> 39 handicapped persons | <input type="checkbox"/> 67 redistricting |
| <input type="checkbox"/> 12 cemeteries | <input type="checkbox"/> 40 health & health care | <input type="checkbox"/> 68 religion |
| <input type="checkbox"/> 13 charitable & nonprofit organizations | <input type="checkbox"/> 41 highways & roads | <input type="checkbox"/> 69 retirement systems |
| <input type="checkbox"/> 14 city government | <input type="checkbox"/> 42 historic preservation & museums | <input type="checkbox"/> 70 safety |
| <input type="checkbox"/> 15 civil remedies & liabilities | <input type="checkbox"/> 43 hospitals | <input type="checkbox"/> 71 special districts & authorities |
| <input type="checkbox"/> 16 coastal affairs & beaches | <input type="checkbox"/> 44 housing | <input checked="" type="checkbox"/> 72 state agencies, boards & commissions |
| <input type="checkbox"/> 17 common carriers | <input type="checkbox"/> 45 human services | <input type="checkbox"/> 73 state employees, officers & symbols |
| <input type="checkbox"/> 18 communication & press | <input type="checkbox"/> 46 insurance | <input type="checkbox"/> 74 state finances |
| <input type="checkbox"/> 19 consumer protection | <input type="checkbox"/> 47 labor | <input type="checkbox"/> 75 taxation |
| <input type="checkbox"/> 20 corporations & associations | <input type="checkbox"/> 48 law enforcement | <input type="checkbox"/> 76 tort reform |
| <input type="checkbox"/> 21 corrections | <input type="checkbox"/> 49 lawyers | <input type="checkbox"/> 77 tourism |
| <input type="checkbox"/> 22 county government | <input type="checkbox"/> 50 libraries | <input type="checkbox"/> 78 transportation |
| <input type="checkbox"/> 23 courts | <input type="checkbox"/> 51 malpractice-health care providers | <input type="checkbox"/> 79 utilities |
| <input type="checkbox"/> 24 crime | <input type="checkbox"/> 52 mental health & cognition | <input type="checkbox"/> 80 vehicles & traffic |
| <input type="checkbox"/> 25 criminal procedures | <input type="checkbox"/> 53 military & veterans | <input type="checkbox"/> 81 water |
| <input type="checkbox"/> 26 day care | <input type="checkbox"/> 54 mines & mineral resources | <input type="checkbox"/> 82 weapons |
| <input type="checkbox"/> 27 disaster preparedness & relief | <input type="checkbox"/> 55 minors | <input type="checkbox"/> 83 women's issues |
| <input type="checkbox"/> 28 economic & industrial development | <input type="checkbox"/> 56 nursing homes | |
| <input checked="" type="checkbox"/> 84 OTHER Medical Waste | | |

13 DOCKET NOS. OR OTHER DESIGNATION

- not applicable
 additional pages

DESIGNATION	AGENCY
DESIGNATION	AGENCY
DESIGNATION	AGENCY

GO TO SCHEDULE B

**AMENDMENT: EMPLOYER / CLIENT
PART 1 - GENERAL INFORMATION**

**FORM AREG
SCHEDULE A PG 1**

Use the Form AREG Instruction Guide for assistance in filling out Schedule A Part 1.

1 PAGE #
Sch: 1/1 Rpt: 60/76

2 REGISTRANT NAME	DeWitt, Cathy S. (Ms.)				
3 EMPLOYER / CLIENT NAME	Texas Association of Staffing				
4 EMPLOYER / CLIENT MAILING ADDRESS	ADDRESS / P.O. BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE
	P. O. Box 7291				
	Tyler, TX 75711				

PART 2 - COMPENSATION

1 LEVEL OF COMPENSATION FOR LOBBYING	Less than \$18,890				
2 TYPE OF COMPENSATION BEING REPORTED	<input type="checkbox"/> PAID	<input type="checkbox"/> EARNED (but not received)	<input checked="" type="checkbox"/> PROSPECTIVE		
3 INDIVIDUAL REPORTING COMPENSATION AND/OR REIMBURSEMENT FOR ENTITY	<input type="checkbox"/> YES	NAME OF ENTITY	_____		
		ADDRESS OF ENTITY	_____		
	<input checked="" type="checkbox"/> NO	PHONE NO. OF ENTITY	_____		

PART 3 - ORGANIZATIONAL INFORMATION

1 IS THE EMPLOYER/CLIENT AN ENTITY OR AN INDIVIDUAL?	<input checked="" type="checkbox"/> ENTITY	<input type="checkbox"/> INDIVIDUAL (Complete PART 4 of SCHEDULE A)
2 IS THE EMPLOYER/CLIENT A CORPORATION?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO (Complete PART 3(a) of SCHEDULE A)
3 ARE THE SHARES OF THE CORPORATION PUBLICLY TRADED?	<input type="checkbox"/> YES (Complete PART 4 of SCHEDULE A)	<input checked="" type="checkbox"/> NO (Complete PART 3(b) of SCHEDULE A)
4 IS THE CLIENT A STATE AGENCY THAT PAYS YOU A SALES COMMISSION OR SUCH FEE?	<input type="checkbox"/> YES (Complete PART 5 of SCHEDULE A)	<input checked="" type="checkbox"/> NO

AMENDMENT: EMPLOYER / CLIENT
Part 3(b) - CORPORATION NOT PUBLICLY TRADED

FORM AREG
SCHEDULE A PG 3

Complete PART 3(b) only if the employer/client covered by this SCHEDULE A is a corporation whose shares are not publicly traded. Attach additional copies of this form as needed.

PAGE #
 Sch: 1/4 Rpt: 61/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 Texas Association of Staffing

1 CORPORATE SHAREHOLDERS	NUMBER OF SHAREHOLDERS N/A
2 CORPORATE OFFICERS AND BOARD MEMBERS <input checked="" type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE Abandonato, Marcel
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE P. O. Box 7291 Tyler, TX 75711
	LAST; SUFFIX; FIRST; TITLE Anderson, David
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE P. O. Box 7291 Tyler, TX 75711
	LAST; SUFFIX; FIRST; TITLE Bowmer, James
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE P. O. Box 7291 Tyler, TX 75711
	LAST; SUFFIX; FIRST; TITLE Bratton, Pam
3 CORPORATE OWNERSHIP/ HOLDINGS PERSONS OWNING 10% OR MORE SHARES <input checked="" type="checkbox"/> not applicable <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 3(b) - CORPORATION NOT PUBLICLY TRADED

FORM AREG
SCHEDULE A PG 3

Complete PART 3(b) only if the employer/client covered by this SCHEDULE A is a corporation whose shares are not publicly traded. Attach additional copies of this form as needed.

PAGE #
 Sch: 2/4 Rpt: 62/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 Texas Association of Staffing

1 CORPORATE SHAREHOLDERS	NUMBER OF SHAREHOLDERS N/A
2 CORPORATE OFFICERS AND BOARD MEMBERS <input checked="" type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE Burnett, Rick
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE P. O. Box 7291 Tyler, TX 75711
	LAST; SUFFIX; FIRST; TITLE Cantu, Chanel
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE P. O. Box 7291 Tyler, TX 75711
	LAST; SUFFIX; FIRST; TITLE DeBellas, Jamie
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE P. O. Box 7291 Tyler, TX 75711
	LAST; SUFFIX; FIRST; TITLE Finstad, Josh
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE P. O. Box 7291 Tyler, TX 75711
3 CORPORATE OWNERSHIP/ HOLDINGS PERSONS OWNING 10% OR MORE SHARES <input checked="" type="checkbox"/> not applicable <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 3(b) - CORPORATION NOT PUBLICLY TRADED

FORM AREG
SCHEDULE A PG 3

Complete PART 3(b) only if the employer/client covered by this SCHEDULE A is a corporation whose shares are not publicly traded. Attach additional copies of this form as needed.

PAGE #
 Sch: 3/4 Rpt: 63/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 Texas Association of Staffing

1 CORPORATE SHAREHOLDERS	NUMBER OF SHAREHOLDERS N/A
2 CORPORATE OFFICERS AND BOARD MEMBERS <input checked="" type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE Howard, Dan
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE P. O. Box 7291 Tyler, TX 75711
	LAST; SUFFIX; FIRST; TITLE Howard, David
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE P. O. Box 7291 Tyler, TX 75711
	LAST; SUFFIX; FIRST; TITLE Hudson, Kelly
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE P. O. Box 7291 Tyler, TX 75711
	LAST; SUFFIX; FIRST; TITLE Kittrell-Kinkaid, Mary
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE P. O. Box 7291 Tyler, TX 75711
3 CORPORATE OWNERSHIP/ HOLDINGS PERSONS OWNING 10% OR MORE SHARES <input checked="" type="checkbox"/> not applicable <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 3(b) - CORPORATION NOT PUBLICLY TRADED

FORM AREG
SCHEDULE A PG 3

Complete PART 3(b) only if the employer/client covered by this SCHEDULE A is a corporation whose shares are not publicly traded. Attach additional copies of this form as needed.

PAGE #
 Sch: 4/4 Rpt: 64/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 Texas Association of Staffing

1 CORPORATE SHAREHOLDERS	NUMBER OF SHAREHOLDERS N/A			
2 CORPORATE OFFICERS AND BOARD MEMBERS <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE Landry, Tom			
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE P. O. Box 7291 Tyler, TX 75711			
	LAST; SUFFIX; FIRST; TITLE Perdue, Chastity			
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE P. O. Box 7291 Tyler, TX 75711			
	LAST; SUFFIX; FIRST; TITLE Turpin, Mark			
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE P. O. Box 7291 Tyler, TX 75711			
	LAST; SUFFIX; FIRST; TITLE			
	ADDRESS / P.O. BOX; APT / SUITE #; CITY; STATE; ZIP CODE			
3 CORPORATE OWNERSHIP/ HOLDINGS PERSONS OWNING 10% OR MORE SHARES <input checked="" type="checkbox"/> not applicable <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE			
	LAST; SUFFIX; FIRST; TITLE			
	LAST; SUFFIX; FIRST; TITLE			
	LAST; SUFFIX; FIRST; TITLE			

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 4 - LOBBYING SUBJECT MATTER

FORM AREG
SCHEDULE A PG 4

Use the FORM AREG INSTRUCTION GUIDE for assistance in filling out this form

Page #
 Sch: 1/1 Rpt: 65/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 Texas Association of Staffing

1 SUBJECT MATTER

SUBJECT MATTER CATEGORIES

- | | | |
|--------------------------------------------------------------------------|---------------------------------------------------------------|-----------------------------------------------------------------------------|
| <input type="checkbox"/> 1 abortion | <input type="checkbox"/> 29 education | <input checked="" type="checkbox"/> 57 occupational regulation |
| <input type="checkbox"/> 2 aeronautics | <input type="checkbox"/> 30 elections | <input type="checkbox"/> 58 oil & gas |
| <input type="checkbox"/> 3 aging | <input type="checkbox"/> 31 energy | <input type="checkbox"/> 59 open records & open meetings |
| <input type="checkbox"/> 4 agriculture | <input type="checkbox"/> 32 environment | <input type="checkbox"/> 60 parks & wildlife |
| <input type="checkbox"/> 5 alcoholic beverage regulation | <input type="checkbox"/> 33 ethics | <input type="checkbox"/> 61 political subdivisions |
| <input type="checkbox"/> 6 alcoholism & drug abuse | <input type="checkbox"/> 34 family issues | <input type="checkbox"/> 62 probate |
| <input type="checkbox"/> 7 aliens | <input type="checkbox"/> 35 fees & other non-tax revenue | <input type="checkbox"/> 63 product liability |
| <input type="checkbox"/> 8 amusements, games, sports | <input type="checkbox"/> 36 financial institutions | <input type="checkbox"/> 64 property interests |
| <input type="checkbox"/> 9 animals | <input type="checkbox"/> 37 fire fighters & police | <input type="checkbox"/> 65 public lands |
| <input type="checkbox"/> 10 arts & humanities | <input type="checkbox"/> 38 gambling | <input type="checkbox"/> 66 purchasing |
| <input checked="" type="checkbox"/> 11 business & commerce | <input type="checkbox"/> 39 handicapped persons | <input type="checkbox"/> 67 redistricting |
| <input type="checkbox"/> 12 cemeteries | <input type="checkbox"/> 40 health & health care | <input type="checkbox"/> 68 religion |
| <input type="checkbox"/> 13 charitable & nonprofit organizations | <input type="checkbox"/> 41 highways & roads | <input type="checkbox"/> 69 retirement systems |
| <input type="checkbox"/> 14 city government | <input type="checkbox"/> 42 historic preservation & museums | <input type="checkbox"/> 70 safety |
| <input type="checkbox"/> 15 civil remedies & liabilities | <input type="checkbox"/> 43 hospitals | <input type="checkbox"/> 71 special districts & authorities |
| <input type="checkbox"/> 16 coastal affairs & beaches | <input type="checkbox"/> 44 housing | <input checked="" type="checkbox"/> 72 state agencies, boards & commissions |
| <input type="checkbox"/> 17 common carriers | <input type="checkbox"/> 45 human services | <input type="checkbox"/> 73 state employees, officers & symbols |
| <input type="checkbox"/> 18 communication & press | <input type="checkbox"/> 46 insurance | <input type="checkbox"/> 74 state finances |
| <input type="checkbox"/> 19 consumer protection | <input type="checkbox"/> 47 labor | <input type="checkbox"/> 75 taxation |
| <input checked="" type="checkbox"/> 20 corporations & associations | <input type="checkbox"/> 48 law enforcement | <input type="checkbox"/> 76 tort reform |
| <input type="checkbox"/> 21 corrections | <input type="checkbox"/> 49 lawyers | <input type="checkbox"/> 77 tourism |
| <input type="checkbox"/> 22 county government | <input type="checkbox"/> 50 libraries | <input type="checkbox"/> 78 transportation |
| <input type="checkbox"/> 23 courts | <input type="checkbox"/> 51 malpractice-health care providers | <input type="checkbox"/> 79 utilities |
| <input type="checkbox"/> 24 crime | <input type="checkbox"/> 52 mental health & cognition | <input type="checkbox"/> 80 vehicles & traffic |
| <input type="checkbox"/> 25 criminal procedures | <input type="checkbox"/> 53 military & veterans | <input type="checkbox"/> 81 water |
| <input type="checkbox"/> 26 day care | <input type="checkbox"/> 54 mines & mineral resources | <input type="checkbox"/> 82 weapons |
| <input type="checkbox"/> 27 disaster preparedness & relief | <input type="checkbox"/> 55 minors | <input type="checkbox"/> 83 women's issues |
| <input checked="" type="checkbox"/> 28 economic & industrial development | <input type="checkbox"/> 56 nursing homes | |
| <input type="checkbox"/> 84 OTHER | | |

13 DOCKET NOS. OR OTHER DESIGNATION

- not applicable
 additional pages

DESIGNATION	AGENCY
DESIGNATION	AGENCY
DESIGNATION	AGENCY

GO TO SCHEDULE B

**AMENDMENT: EMPLOYER / CLIENT
PART 1 - GENERAL INFORMATION**

**FORM AREG
SCHEDULE A PG 1**

Use the Form AREG Instruction Guide for assistance in filling out Schedule A Part 1.

1 PAGE #
Sch: 1/1 Rpt: 66/76

2 REGISTRANT NAME	DeWitt, Cathy S. (Ms.)				
3 EMPLOYER / CLIENT NAME	Texas Pyrotechic Association				
4 EMPLOYER / CLIENT MAILING ADDRESS	ADDRESS / P.O. BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE
	P. O. Box 64				
	Bastrop, TX 78602				

PART 2 - COMPENSATION

1 LEVEL OF COMPENSATION FOR LOBBYING	Less than \$18,890				
2 TYPE OF COMPENSATION BEING REPORTED	<input type="checkbox"/> PAID	<input type="checkbox"/> EARNED (but not received)	<input checked="" type="checkbox"/> PROSPECTIVE		
3 INDIVIDUAL REPORTING COMPENSATION AND/OR REIMBURSEMENT FOR ENTITY	<input type="checkbox"/> YES	NAME OF ENTITY	_____		
		ADDRESS OF ENTITY	_____		
	<input checked="" type="checkbox"/> NO	PHONE NO. OF ENTITY	_____		

PART 3 - ORGANIZATIONAL INFORMATION

1 IS THE EMPLOYER/CLIENT AN ENTITY OR AN INDIVIDUAL?	<input checked="" type="checkbox"/> ENTITY	<input type="checkbox"/> INDIVIDUAL (Complete PART 4 of SCHEDULE A)
2 IS THE EMPLOYER/CLIENT A CORPORATION?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO (Complete PART 3(a) of SCHEDULE A)
3 ARE THE SHARES OF THE CORPORATION PUBLICLY TRADED?	<input type="checkbox"/> YES (Complete PART 4 of SCHEDULE A)	<input type="checkbox"/> NO (Complete PART 3(b) of SCHEDULE A)
4 IS THE CLIENT A STATE AGENCY THAT PAYS YOU A SALES COMMISSION OR SUCH FEE?	<input type="checkbox"/> YES (Complete PART 5 of SCHEDULE A)	<input checked="" type="checkbox"/> NO

AMENDMENT: EMPLOYER / CLIENT
Part 3(a) - UNINCORPORATED ENTITY

FORM AREG
SCHEDULE A PG 2

Complete PART 3(a) only if the employer/client covered by this SCHEDULE A is an unincorporated entity. Attach additional copies of this form as needed.

PAGE #
 Sch: 1/1 Rpt: 67/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 Texas Pyrotechic Association

1 ENTITY MEMBERSHIP	NUMBER OF MEMBERS 0
2 NAME(S) OF PERSON(S) WHO DETERMINE LOBBY POLICY <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE Davis, Chester
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
3 DESCRIPTION OF POLICY-MAKING METHODS <input type="checkbox"/> additional pages	DESCRIBE METHODS OF ENTITY DECISION-MAKING RELATING TO LOBBYING After research and discussions decisions are made.
4 CONTRIBUTORS PERSON(S) CONTRIBUTING MORE THAN \$250 PER YEAR <input checked="" type="checkbox"/> not applicable <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 4 - LOBBYING SUBJECT MATTER

FORM AREG
SCHEDULE A PG 4

Use the FORM AREG INSTRUCTION GUIDE for assistance in filling out this form

Page #
 Sch: 1/1 Rpt: 68/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 Texas Pyrotechic Association

1 SUBJECT MATTER

SUBJECT MATTER CATEGORIES

- | | | |
|---------------------------------------------------------------------|---------------------------------------------------------------|------------------------------------------------------------------------|
| <input type="checkbox"/> 1 abortion | <input type="checkbox"/> 29 education | <input type="checkbox"/> 57 occupational regulation |
| <input type="checkbox"/> 2 aeronautics | <input type="checkbox"/> 30 elections | <input type="checkbox"/> 58 oil & gas |
| <input type="checkbox"/> 3 aging | <input type="checkbox"/> 31 energy | <input type="checkbox"/> 59 open records & open meetings |
| <input type="checkbox"/> 4 agriculture | <input type="checkbox"/> 32 environment | <input type="checkbox"/> 60 parks & wildlife |
| <input type="checkbox"/> 5 alcoholic beverage regulation | <input type="checkbox"/> 33 ethics | <input type="checkbox"/> 61 political subdivisions |
| <input type="checkbox"/> 6 alcoholism & drug abuse | <input type="checkbox"/> 34 family issues | <input type="checkbox"/> 62 probate |
| <input type="checkbox"/> 7 aliens | <input type="checkbox"/> 35 fees & other non-tax revenue | <input checked="" type="checkbox"/> 63 product liability |
| <input checked="" type="checkbox"/> 8 amusements, games, sports | <input type="checkbox"/> 36 financial institutions | <input type="checkbox"/> 64 property interests |
| <input type="checkbox"/> 9 animals | <input checked="" type="checkbox"/> 37 fire fighters & police | <input type="checkbox"/> 65 public lands |
| <input type="checkbox"/> 10 arts & humanities | <input type="checkbox"/> 38 gambling | <input type="checkbox"/> 66 purchasing |
| <input checked="" type="checkbox"/> 11 business & commerce | <input type="checkbox"/> 39 handicapped persons | <input type="checkbox"/> 67 redistricting |
| <input type="checkbox"/> 12 cemeteries | <input type="checkbox"/> 40 health & health care | <input type="checkbox"/> 68 religion |
| <input type="checkbox"/> 13 charitable & nonprofit organizations | <input checked="" type="checkbox"/> 41 highways & roads | <input type="checkbox"/> 69 retirement systems |
| <input checked="" type="checkbox"/> 14 city government | <input type="checkbox"/> 42 historic preservation & museums | <input checked="" type="checkbox"/> 70 safety |
| <input checked="" type="checkbox"/> 15 civil remedies & liabilities | <input type="checkbox"/> 43 hospitals | <input checked="" type="checkbox"/> 71 special districts & authorities |
| <input type="checkbox"/> 16 coastal affairs & beaches | <input type="checkbox"/> 44 housing | <input type="checkbox"/> 72 state agencies, boards & commissions |
| <input checked="" type="checkbox"/> 17 common carriers | <input type="checkbox"/> 45 human services | <input type="checkbox"/> 73 state employees, officers & symbols |
| <input type="checkbox"/> 18 communication & press | <input type="checkbox"/> 46 insurance | <input type="checkbox"/> 74 state finances |
| <input checked="" type="checkbox"/> 19 consumer protection | <input checked="" type="checkbox"/> 47 labor | <input type="checkbox"/> 75 taxation |
| <input type="checkbox"/> 20 corporations & associations | <input type="checkbox"/> 48 law enforcement | <input type="checkbox"/> 76 tort reform |
| <input type="checkbox"/> 21 corrections | <input type="checkbox"/> 49 lawyers | <input type="checkbox"/> 77 tourism |
| <input checked="" type="checkbox"/> 22 county government | <input type="checkbox"/> 50 libraries | <input checked="" type="checkbox"/> 78 transportation |
| <input type="checkbox"/> 23 courts | <input type="checkbox"/> 51 malpractice-health care providers | <input type="checkbox"/> 79 utilities |
| <input type="checkbox"/> 24 crime | <input type="checkbox"/> 52 mental health & cognition | <input type="checkbox"/> 80 vehicles & traffic |
| <input type="checkbox"/> 25 criminal procedures | <input type="checkbox"/> 53 military & veterans | <input type="checkbox"/> 81 water |
| <input type="checkbox"/> 26 day care | <input type="checkbox"/> 54 mines & mineral resources | <input type="checkbox"/> 82 weapons |
| <input type="checkbox"/> 27 disaster preparedness & relief | <input type="checkbox"/> 55 minors | <input type="checkbox"/> 83 women's issues |
| <input type="checkbox"/> 28 economic & industrial development | <input type="checkbox"/> 56 nursing homes | |
| <input checked="" type="checkbox"/> 84 OTHER | | |

13 DOCKET NOS. OR OTHER DESIGNATION

- not applicable
 additional pages

DESIGNATION

AGENCY

DESIGNATION

AGENCY

DESIGNATION

AGENCY

GO TO SCHEDULE B

**AMENDMENT: EMPLOYER / CLIENT
PART 1 - GENERAL INFORMATION**

**FORM AREG
SCHEDULE A PG 1**

Use the Form AREG Instruction Guide for assistance in filling out Schedule A Part 1.

1 PAGE #
Sch: 1/1 Rpt: 69/76

2 REGISTRANT NAME	DeWitt, Cathy S. (Ms.)				
3 EMPLOYER / CLIENT NAME	United Services Automobile Association				
4 EMPLOYER / CLIENT MAILING ADDRESS	ADDRESS / P.O. BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE
	9800 Fredericksburg Rd.				
	San Antonio, TX 78288				

PART 2 - COMPENSATION

1 LEVEL OF COMPENSATION FOR LOBBYING	Less than \$18,890				
2 TYPE OF COMPENSATION BEING REPORTED	<input type="checkbox"/> PAID	<input type="checkbox"/> EARNED (but not received)	<input checked="" type="checkbox"/> PROSPECTIVE		
3 INDIVIDUAL REPORTING COMPENSATION AND/OR REIMBURSEMENT FOR ENTITY	<input type="checkbox"/> YES	NAME OF ENTITY	_____		
		ADDRESS OF ENTITY	_____		
	<input checked="" type="checkbox"/> NO	PHONE NO. OF ENTITY	_____		

PART 3 - ORGANIZATIONAL INFORMATION

1 IS THE EMPLOYER/CLIENT AN ENTITY OR AN INDIVIDUAL?	<input checked="" type="checkbox"/> ENTITY	<input type="checkbox"/> INDIVIDUAL (Complete PART 4 of SCHEDULE A)
2 IS THE EMPLOYER/CLIENT A CORPORATION?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO (Complete PART 3(a) of SCHEDULE A)
3 ARE THE SHARES OF THE CORPORATION PUBLICLY TRADED?	<input type="checkbox"/> YES (Complete PART 4 of SCHEDULE A)	<input type="checkbox"/> NO (Complete PART 3(b) of SCHEDULE A)
4 IS THE CLIENT A STATE AGENCY THAT PAYS YOU A SALES COMMISSION OR SUCH FEE?	<input type="checkbox"/> YES (Complete PART 5 of SCHEDULE A)	<input checked="" type="checkbox"/> NO

AMENDMENT: EMPLOYER / CLIENT
Part 3(a) - UNINCORPORATED ENTITY

FORM AREG
SCHEDULE A PG 2

Complete PART 3(a) only if the employer/client covered by this SCHEDULE A is an unincorporated entity. Attach additional copies of this form as needed.

PAGE #
 Sch: 1/4 Rpt: 70/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 United Services Automobile Association

1 ENTITY MEMBERSHIP	NUMBER OF MEMBERS 1
2 NAME(S) OF PERSON(S) WHO DETERMINE LOBBY POLICY <input checked="" type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE Andrade, Juan
	LAST; SUFFIX; FIRST; TITLE Bulls, Herman (Colonel)
	LAST; SUFFIX; FIRST; TITLE Collins, Eileen M. (Colonel)
	LAST; SUFFIX; FIRST; TITLE Darnell, David
	LAST; SUFFIX; FIRST; TITLE Davis, Raymond
3 DESCRIPTION OF POLICY-MAKING METHODS <input type="checkbox"/> additional pages	DESCRIBE METHODS OF ENTITY DECISION-MAKING RELATING TO LOBBYING Policy made by vote of Board of Directors.
4 CONTRIBUTORS PERSON(S) CONTRIBUTING MORE THAN \$250 PER YEAR <input checked="" type="checkbox"/> not applicable <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 3(a) - UNINCORPORATED ENTITY

FORM AREG
SCHEDULE A PG 2

Complete PART 3(a) only if the employer/client covered by this SCHEDULE A is an unincorporated entity. Attach additional copies of this form as needed.

PAGE #
 Sch: 2/4 Rpt: 71/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 United Services Automobile Association

1 ENTITY MEMBERSHIP	NUMBER OF MEMBERS 1
2 NAME(S) OF PERSON(S) WHO DETERMINE LOBBY POLICY <input checked="" type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE Garrett, Tracy L. (Maj. Gen.)
	LAST; SUFFIX; FIRST; TITLE Landry, Mary E.
	LAST; SUFFIX; FIRST; TITLE McDew, Darren W. (General)
	LAST; SUFFIX; FIRST; TITLE McKibben, Tracy B.
	LAST; SUFFIX; FIRST; TITLE Melcher, David (Lt. Gen.)
3 DESCRIPTION OF POLICY-MAKING METHODS <input type="checkbox"/> additional pages	DESCRIBE METHODS OF ENTITY DECISION-MAKING RELATING TO LOBBYING
4 CONTRIBUTORS PERSON(S) CONTRIBUTING MORE THAN \$250 PER YEAR <input checked="" type="checkbox"/> not applicable <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 3(a) - UNINCORPORATED ENTITY

FORM AREG
SCHEDULE A PG 2

Complete PART 3(a) only if the employer/client covered by this SCHEDULE A is an unincorporated entity. Attach additional copies of this form as needed.

PAGE #
 Sch: 3/4 Rpt: 72/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 United Services Automobile Association

1 ENTITY MEMBERSHIP	NUMBER OF MEMBERS 1
2 NAME(S) OF PERSON(S) WHO DETERMINE LOBBY POLICY <input checked="" type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE Moran Jr., William
	LAST; SUFFIX; FIRST; TITLE Murray, Gerald R.
	LAST; SUFFIX; FIRST; TITLE Peacock, Wayne
	LAST; SUFFIX; FIRST; TITLE Phillips, G. Patrick
	LAST; SUFFIX; FIRST; TITLE VanAntwerp, Robert (Lt. Gen.)
3 DESCRIPTION OF POLICY-MAKING METHODS <input type="checkbox"/> additional pages	DESCRIBE METHODS OF ENTITY DECISION-MAKING RELATING TO LOBBYING
4 CONTRIBUTORS PERSON(S) CONTRIBUTING MORE THAN \$250 PER YEAR <input checked="" type="checkbox"/> not applicable <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 3(a) - UNINCORPORATED ENTITY

FORM AREG
SCHEDULE A PG 2

Complete PART 3(a) only if the employer/client covered by this SCHEDULE A is an unincorporated entity. Attach additional copies of this form as needed.

PAGE #
 Sch: 4/4 Rpt: 73/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 United Services Automobile Association

1 ENTITY MEMBERSHIP	NUMBER OF MEMBERS 1
2 NAME(S) OF PERSON(S) WHO DETERMINE LOBBY POLICY <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE Young, John F.
	LAST; SUFFIX; FIRST; TITLE Young, Dona
	LAST; SUFFIX; FIRST; TITLE Zortman, James M.
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
3 DESCRIPTION OF POLICY-MAKING METHODS <input type="checkbox"/> additional pages	DESCRIBE METHODS OF ENTITY DECISION-MAKING RELATING TO LOBBYING
4 CONTRIBUTORS PERSON(S) CONTRIBUTING MORE THAN \$250 PER YEAR <input checked="" type="checkbox"/> not applicable <input type="checkbox"/> additional pages	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE
	LAST; SUFFIX; FIRST; TITLE

GO TO SCHEDULE A, PART 4

AMENDMENT: EMPLOYER / CLIENT
Part 4 - LOBBYING SUBJECT MATTER

FORM AREG
SCHEDULE A PG 4

Use the FORM AREG INSTRUCTION GUIDE for assistance in filling out this form

Page #
 Sch: 1/1 Rpt: 74/76

REGISTRANT NAME
 DeWitt, Cathy S. (Ms.)

EMPLOYER/CLIENT NAME
 United Services Automobile Association

1 SUBJECT MATTER

SUBJECT MATTER CATEGORIES

- | | | |
|---------------------------------------------------------------------|---------------------------------------------------------------|-----------------------------------------------------------------------------|
| <input type="checkbox"/> 1 abortion | <input type="checkbox"/> 29 education | <input type="checkbox"/> 57 occupational regulation |
| <input type="checkbox"/> 2 aeronautics | <input type="checkbox"/> 30 elections | <input type="checkbox"/> 58 oil & gas |
| <input type="checkbox"/> 3 aging | <input type="checkbox"/> 31 energy | <input type="checkbox"/> 59 open records & open meetings |
| <input type="checkbox"/> 4 agriculture | <input type="checkbox"/> 32 environment | <input type="checkbox"/> 60 parks & wildlife |
| <input type="checkbox"/> 5 alcoholic beverage regulation | <input type="checkbox"/> 33 ethics | <input type="checkbox"/> 61 political subdivisions |
| <input type="checkbox"/> 6 alcoholism & drug abuse | <input type="checkbox"/> 34 family issues | <input type="checkbox"/> 62 probate |
| <input type="checkbox"/> 7 aliens | <input type="checkbox"/> 35 fees & other non-tax revenue | <input checked="" type="checkbox"/> 63 product liability |
| <input type="checkbox"/> 8 amusements, games, sports | <input checked="" type="checkbox"/> 36 financial institutions | <input type="checkbox"/> 64 property interests |
| <input type="checkbox"/> 9 animals | <input type="checkbox"/> 37 fire fighters & police | <input type="checkbox"/> 65 public lands |
| <input type="checkbox"/> 10 arts & humanities | <input type="checkbox"/> 38 gambling | <input type="checkbox"/> 66 purchasing |
| <input checked="" type="checkbox"/> 11 business & commerce | <input type="checkbox"/> 39 handicapped persons | <input type="checkbox"/> 67 redistricting |
| <input type="checkbox"/> 12 cemeteries | <input checked="" type="checkbox"/> 40 health & health care | <input type="checkbox"/> 68 religion |
| <input type="checkbox"/> 13 charitable & nonprofit organizations | <input type="checkbox"/> 41 highways & roads | <input type="checkbox"/> 69 retirement systems |
| <input type="checkbox"/> 14 city government | <input type="checkbox"/> 42 historic preservation & museums | <input type="checkbox"/> 70 safety |
| <input checked="" type="checkbox"/> 15 civil remedies & liabilities | <input type="checkbox"/> 43 hospitals | <input type="checkbox"/> 71 special districts & authorities |
| <input type="checkbox"/> 16 coastal affairs & beaches | <input type="checkbox"/> 44 housing | <input checked="" type="checkbox"/> 72 state agencies, boards & commissions |
| <input type="checkbox"/> 17 common carriers | <input type="checkbox"/> 45 human services | <input type="checkbox"/> 73 state employees, officers & symbols |
| <input type="checkbox"/> 18 communication & press | <input checked="" type="checkbox"/> 46 insurance | <input type="checkbox"/> 74 state finances |
| <input type="checkbox"/> 19 consumer protection | <input type="checkbox"/> 47 labor | <input checked="" type="checkbox"/> 75 taxation |
| <input checked="" type="checkbox"/> 20 corporations & associations | <input type="checkbox"/> 48 law enforcement | <input checked="" type="checkbox"/> 76 tort reform |
| <input type="checkbox"/> 21 corrections | <input type="checkbox"/> 49 lawyers | <input type="checkbox"/> 77 tourism |
| <input type="checkbox"/> 22 county government | <input type="checkbox"/> 50 libraries | <input type="checkbox"/> 78 transportation |
| <input type="checkbox"/> 23 courts | <input type="checkbox"/> 51 malpractice-health care providers | <input type="checkbox"/> 79 utilities |
| <input type="checkbox"/> 24 crime | <input type="checkbox"/> 52 mental health & cognition | <input type="checkbox"/> 80 vehicles & traffic |
| <input type="checkbox"/> 25 criminal procedures | <input checked="" type="checkbox"/> 53 military & veterans | <input checked="" type="checkbox"/> 81 water |
| <input type="checkbox"/> 26 day care | <input type="checkbox"/> 54 mines & mineral resources | <input type="checkbox"/> 82 weapons |
| <input type="checkbox"/> 27 disaster preparedness & relief | <input type="checkbox"/> 55 minors | <input type="checkbox"/> 83 women's issues |
| <input type="checkbox"/> 28 economic & industrial development | <input type="checkbox"/> 56 nursing homes | |
| <input type="checkbox"/> 84 OTHER | | |

13 DOCKET NOS. OR OTHER DESIGNATION

- not applicable
 additional pages

DESIGNATION	AGENCY
DESIGNATION	AGENCY
DESIGNATION	AGENCY

GO TO SCHEDULE B

**AMENDMENT: LOBBY REGISTRATION
DELETIONS**

**FORM AREG
SCHEDULE C**

Use the Form AREG Instruction Guide for assistance in filling out Schedule C.
Attach additional pages as needed.

1 Total pages this Schedule C:
Sch: 1/1 Rpt: 75/76

2 REGISTRANT NAME

DeWitt, Cathy S. (Ms.)

Type of Deletion

Employer / Client

Assistant

Name

DJI Technology, Inc.

GO TO SCHEDULE A, PART 4

TEXT ANNOTATION

Sch: 1/1 Rpt: 76/76

FILER NAME
DeWitt, Cathy S. (Ms.)

Filer ID (Ethics Commission Filers)
00060628

Schedule
AMENDITEMS

Record Type	Tracking Info	Record Detail
Report Info	Report	100872264
Lobby Client Info	Report	