

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

Year 2013

Original
 Amendment

LOBBYIST ACTIVITY REPORT *

(See next page for instructions)

ID# LOB000091349

Type of Report: January 10th If you are filing a January Report please indicate whether you intend to lobby in the upcoming calendar year. Yes No

July _____

1. (a) Registrant's Name Altria Client Services, Inc. and its Affiliates (b) Daytime Phone Number (202) 354-1500

(c) Permanent Address 101 Constitution Avenue, N.W., Suite 400-W Washington, D.C. 20001
(Street Address) (City, State, Zip Code)

(d) Temporary Address (while lobbying)
(Street Address) (City, State, Zip Code)

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

(a) Name <u>Frank D. Boston III</u>	(b) Name <u>Mary Eva Candon</u>
Address <u>2002 Clipper Park Road, Suite 108</u> (Street Address)	Address <u>2122 California Street N.W. #562</u> (Street Address)
<u>Baltimore, MD 21211</u> (City, State, Zip Code)	<u>Washington, D.C. 20008</u> (City, State, Zip Code)
Daytime Phone Number <u>(410) 769-8080</u>	Daytime Phone Number <u>(202) 354-1500</u>

3. Person Compensating Registrant

(a) Name Altria Client Services, Inc. and its Affiliates (b) Daytime Phone Number (202) 354-1500

(c) Address 101 Constitution Avenue, N.W., Suite 400-W Washington, D.C. 20001
(Street Address) (City, State, Zip Code)

(d) Nature of Business Service company and its affiliates -- Philip Morris USA Inc., John Middleton Co., and U.S. Smokeless Tobacco Co. - involved in the manufacture and sale of tobacco products

4. Terms of Compensation: (a) N/A Salary (b) Full year Duration of Employment

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

Matters related to tobacco products

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* REMINDER – Each new or previously registered Lobbyist must file a Lobbyist Registration Form by January 15th of each year.

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Rev. 12/2012

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

Name <u>None</u>	Date _____
Name _____	Date _____

- 7. Total compensation/receipts paid to the Lobbyist for lobbying during the reporting period: \$ 0.00
(Schedule A)
- 8. Total of other compensation/receipts received for lobbying services and compensation paid to others: \$ 0.00
(Schedule A-1)
- 9. Total amount of Loans received by the Lobbyist in connection with lobbying during the reporting period: \$ 0.00
(Schedule A-2)
- 10. Total receipts (Add Lines 7, 8, and 9) \$ 0.00
- 11. Total of expenditures made for purposes of lobbying during the reporting period: \$ 25,250
(Schedule B)
- 12. Total of other expenditures related to lobbying activities: \$ 0.00
(Schedule B-1)
- 13. Total expenditures (Add Lines 11 and 12) \$ 25,250

**BOARD OF ELECTIONS AND GOVERNMENT ACCOUNTABILITY
 LOBBYIST/EMPLOYEE LOBBYIST'S ACTIVITY REPORT PAGE 1 OF 1
 SCHEDULE A – COMPENSATION/RECEIPTS PAID TO THE LOBBYIST FOR LOBBYING:**

YEAR: 2013

Type of Report: January July

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

LOBBYIST/EMPLOYEE LOBBYIST'S NAME: Altria Client Services, Inc. and its Affiliates

COMPENSATION/RECEIPTS PAID FOR LOBBYING (AMOUNTS MAY BE ROUNDED OFF TO WHOLE DOLLARS)					TOTAL THIS PERIOD	CUMULATIVE TOTAL (FEES/COMPENSATION)
EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER (FEES/COMPENSATION)						
N/A						
FEES/RETAINER	COMPENSATION					
\$	\$				\$	\$
EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER (FEES/COMPENSATION)					TOTAL THIS PERIOD	CUMULATIVE TOTAL (FEES/COMPENSATION)
FEES/RETAINER	COMPENSATION					
\$	\$				\$	\$
EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER (FEES/COMPENSATION)					TOTAL THIS PERIOD	CUMULATIVE TOTAL (FEES/COMPENSATION)
FEES/RETAINER	COMPENSATION					
\$	\$				\$	\$
EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER (FEES/COMPENSATION)					TOTAL THIS PERIOD	CUMULATIVE TOTAL (FEES/COMPENSATION)
FEES/RETAINER	COMPENSATION					
\$	\$				\$	\$
TOTAL RECEIPTS RECEIVED FOR LOBBYING (CARRY TOTAL FORWARD TO LINE 7)					\$	\$

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

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

YEAR: 2013

Type of Report: **January** 10th **July** _____

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

LOBBYIST/EMPLOYEE LOBBYIST'S

NAME: Altria Client Services, Inc. and its Affiliates

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

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

BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY
LOBBYIST/EMPLOYEE LOBBYIST'S ACTIVITY REPORT PAGE 1 OF 1
SCHEDULE A-2 LOANS RECEIVED BY THE LOBBYIST
YEAR: 2013

Type of Report: January 10th July

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

LOBBYIST/EMPLOYEE LOBBYIST
 NAME: Altria Client Services, Inc. and its Affiliates

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

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

BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY
COMPENSATING REGISTRANT'S ACTIVITY REPORT PAGE 1 OF 1
SCHEDULE B – EXPENDITURES PAID BY COMPENSATING REGISTRANT TO THE LOBBYIST
YEAR: 2013

Type of Report: January 10th July _____

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

COMPENSATING REGISTRANT'S NAME: Altria Client Services, Inc. and its Affiliates

PAYMENTS MADE IN CONNECTION WITH LOBBYING ACTIVITIES					
ACTIVITY EXPENSES INCURRED, OR PAID BY THE COMPENSATING REGISTRANT TO THE LOBBYIST AND/OR IN-HOUSE EMPLOYEE LOBBYIST FOR ACTIVITIES RELATIVE TO LOBBYING ACTIVITIES IN THE DISTRICT OF COLUMBIA.					
DATE	NAME AND ADDRESS OF PAYEE	PURPOSE OF COMPENSATION	TOTAL THIS PERIOD	CUMULATIVE TOTAL	
7/1/12 - 12/31/12	Frank D. Boston III - 2002 Clipper Park Road, Suite 108, Baltimore, MD 21211	Pro-rata lobbying fees	12,500 \$	25,000 \$	
7/1/12 - 12/31/12	Mary Eva Candon 2122 California Street NW #562 Washington, DC 20008	Pro-rata lobbying fees	12,750 \$	25,500 \$	
7/1/12 - 12/31/12	Kerry Paulson 6601 W. Broad Street Richmond, VA 23230	Pro-rata lobbying fees	0.00 \$	664.90 \$	
7/1/12 - 12/31/12	Elizabeth Cook 101 Constitution Avenue, NW, Suite 400W Washington, DC 20001	Pro-rata lobbying fees	0.00 \$	0.00 \$	
7/1/12 - 12/31/12	Eric Barker 101 Constitution Avenue, NW, Suite 400W Washington, DC 20001	Pro-rata lobbying fees	0.00 \$	0.00 \$	
			\$	\$	
			\$	\$	
			\$	\$	
			\$	\$	
TOTAL EXPENDITURES PAID FOR LOBBYING (CARRY TOTAL FORWARD TO LINE 11)			\$ \$25,250.00	\$ \$51,164.90	

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

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

YEAR: 2013

Type of Report: January 10th July _____

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

COMPENSATING REGISTRANT'S NAME: Altria Client Services, Inc. and its Affiliates

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

DATE	NAME OF RECIPIENT	DESCRIPTION OF CONSIDERATION	TYPE OF COMPENSATION PAID (LOANS, CONTRIBUTION, GIFT, HONORARIA, ETC.)	TOTAL PAYMENT
	N/A			\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
TOTAL OTHER EXPENDITURES PAID FOR LOBBYING (CARRY TOTAL FORWARD TO LINE 12)				

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

**BOARD OF ETHICS AND
GOVERNMENT
ACCOUNTABILITY
LOBBYIST ACTIVITY REPORT
SCHEDULE C** YEAR 2013
(See next page for Instructions)

Type of Report: January ^{10th} July _____

Covering Period July 1, 2012 through December 31, 2012

LOBBYIST/COMPENSATING'S REGISTRANT'S NAME: Altria Client Services Inc., and its Affiliates

DATE	NAME	NATURE OF EMPLOYMENT WITH REGISTRANT
	N/A	

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

[Handwritten Signature]

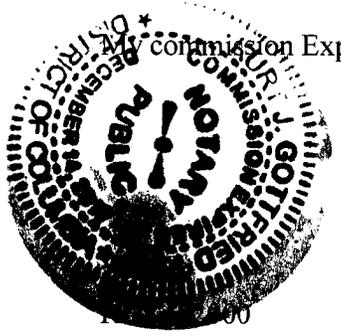
Signature of Registrant (or, if not an individual, an authorized officer or agent* of registrant must sign).

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

Subscribed and sworn to before me on this 9th day of January, 2013

My commission Expires: 12/17/17

[Handwritten Signature]
Notary Public



ID#: LOB000091349

SUPPLEMENTAL SHEET TO FORM: "Lobbyist Activity Report"

RESPONSE TO QUESTION: 2

Eric Barker
101 Constitution Avenue N.W.
Suite 400W
Washington, D.C. 20001
(202) 354-1500