

GOVERNMENT OF THE DISTRICT OF COLUMBIA  
BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY

Year 2013

WASHINGTON, D.C. 20001

Non-Profit  For-Profit

ORIGINAL

LOBBYIST REGISTRATION FORM

(See next page for instructions)

AMENDMENT

Filing Fee Enclosed  \$250.00  
 \$50.00

1. (a) Registrant's Name G.S. Proctor & Associates (b) Daytime Phone Number 202-347-5224  
(c) Permanent Address 444 North Capitol St, NW, Suite 601, Washington, DC 20001  
(Street Address) (City, State, Zip Code)  
(d) Temporary Address (while lobbying) \_\_\_\_\_  
(Street Address) (City, State, Zip Code)  
(e) E-Mail Address dproctor@gsproctor.com

2. Lobbyist(s) Working for Registrant: List the full name of each in-house person employed and each individual retained by you to lobby on your behalf. If you do not employ an in-house person or retain an individual to lobby, state non-applicable.

(a) Name Marin Skokandic (b) Name \_\_\_\_\_  
Address 444 North Capitol St, NW Address \_\_\_\_\_  
(Street Address) (Street Address)  
Washington, DC 20001 \_\_\_\_\_  
(City, State, Zip Code) (City, State, Zip Code)

Daytime Phone Number 202-347-5224 Daytime Phone Number \_\_\_\_\_  
 If more space is needed, check box and attach OCF Supplemental Sheet.

3. Person Compensating Registrant: List the full name of each client with whom you have an agreement for compensation to provide lobbying services. If you do not contract to provide lobbying services, state non-applicable.

(a) Name Firefighters Association of District of Columbia (b) Daytime Phone Number 781-744-0438  
(c) Address 2120 Bladensburg Rd, NE, Washington, DC 20018  
(Street Address) (City, State, Zip Code)  
(d) Nature of Business Fire and Rescue

4. Terms of Compensation: (a) \_\_\_\_\_ (Salary) (b) \_\_\_\_\_ (Duration of Employment)  
 If more space is needed, check box and attach OCF Supplemental Sheet.

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

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

*Jane M. Proctor*

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 9<sup>th</sup> day of July, 2013.

*Brenda Brady*  
Notary Public

My Commission Expires: 10-1-14

BEGA REC'D 10JUL'13