

Virginia Conflict of Interest and Ethics Advisory Council LOBBYIST REGISTRATION FORM (Rev. 4/05)

FOR OFFICE USE ONLY Principal Notification Date ____

Date Received _____ Fee Paid: Check # _____ Cash___

Please send the original and a copy with a \$50.00 registration fee, made Payable to the Treasurer of Virginia to:

Secretary of the Commonwealth Attn: Lobbyist Specialist 1111 E. Broad St 4th Floor Richmond, Virginia 23219

(1) PRINCIPAL:	National Structured Settlements Trade Association
(1a) What type of business is to Promoting the expanded	the principle engaged in: use of structured settlements for injury or accident victims to help protect their settlements.
Officer of Principal authorizing may not appear in items 2 and 3	g your employment as a lobbyist, or to whom your expenditures will be reported. <i>The same name</i> 5 of this form.
(2) Name:	William H. Eric Vaughn
(2a) Business Address:	1100 New York Avenue, NW Suite 750 West, Washington, DC 20005
(2b) Business Telephone:	202-289-4004
	retain ALL records, in behalf of the principal, with respect to your lobbying activities for their sically stored in another location, please so indicate in the space provided by item 3c.
(3) Name:	William H. Eric Vaughn
	1100 New York Avenue, NW Suite 750 West, Washington, DC 20005
(3b) Business Telephone:	202-289-4004
(3c) Business Address/Teleph	one number of location where records are stored:

(4) Please list the full name(s), business address(es), and telephone number(s) of all other individual(s) that are registered to lobby in behalf of the *PRINCIPAL* listed in item 1 of your registration form.

William H. Eric Vaughn National Structured Settlements Trade Association 1100 New York Avenue, NW Suite 750 West Washington, DC 20005 202-289-4004

SECRETARY OF THE COMMONWEALTH LOBBYIST'S REGISTRATION Page Two

(5) LOBBYIST:	William H. Eric Vaughn
(5a) Business Address:	
(5b) Business Telephone:	202-289-4004
	evaughn@nssta.com
	ds, on behalf of the lobbyist, with respect to your lobbying activities for the afore-designated red in another location, please so indicate in the space provided in item 7d.
(6) Name:	William H. Eric Vaughn
(6a) Business Address:	
(6b) Business Telephone:	
	umber of location where records are stored:
Virginia State Structured Se	
(8) As a lobbyist, you are: (check or	ne)
Employed (Lobbyist is or	n payroll of principal)
Retained (Lobbyist is not	on payroll of principal, but is compensated)
Not Compensated (Lobby	yist is not compensated, but expenses may be reimbursed)
	yist is not compensated, but expenses may be reimbursed) time or full-time by the principal, please give your job title:
(9) If you are <i>employed</i> either part-t	
(9) If you are employed either part-t	time or full-time by the principal, please give your job title: