Clerk of the House of Representatives Legislative Resource Center B-106 Cannon Building Washington, DC 20515 http://lobbyingdisclosure.house.gov Secretary of the Senate Office of Public Records 232 Hart Building Washington, DC 20510 http://www.senate.gov/lobby

LOBBYING REPORT

Lobbying Disclosure Act of 1995 (Section 5) - All Filers Are Required to Complete This Page

| 1. Registrant Name Organization/Lobbying Firm Self Employed Individual King & Spalding LLP | | | | | |
|--|---|--------------------------------|--|--|--|
| 2. Address Addressl 1700 Pennsylvania Ave NW | Address2 | | | | |
| City Washington State | <u>DC</u> Zip Code <u>20006</u> | Country <u>USA</u> | | | |
| 3. Principal place of business (if different than line 2) City State | Zip Code | Country | | | |
| 4a. Contact Name b. Telephone Number Mr. Theodore M. Hester 2027370500 | c. E-mail thester@kslaw.com | 5. Senate ID# 21632-1004898 | | | |
| 7. Client Name Self Check if client is a state Southern Research Institute | tte or local government or instrumentality | 6. House ID# 307500171 | | | |
| 9. Check if this filing amends a previously filed version of this report 10. Check if this is a Termination Report 11. No Lobbying Issue Activity INCOME OR EXPENSES - YOU MUST complete either Line 12 or Line 13 | | | | | |
| INCOME relating to lobbying activities for this reporting period was: Less than \$5,000 | EXPENSE relating to lobbying activities for this reporting period were: Less than \$5,000 \$5,000 or more sed to the nearest \$10,000, of the client (including all LESS TRANSE relating to lobbying activities for this reporting period were: Less than \$5,000 \$5,000 or more \$ | | | | |
| Signature Digitally Signed By: Theodore M. Hester, Partner | | Date 10/19/2009 | | | |

| Add additional page(s | s) as needed. | | | • | | • |
|----------------------------|---|-------------------------|--|---------------------------|--------------|--------|
| 15. General issue area | a code DEF | | | | | |
| 16. Specific lobbying | issues | | | | | |
| Issues related to defer | nse, intelligence and force p | protection | | | | |
| 17. House(s) of Cong | ress and Federal agencies | Check if No | one | | | |
| U.S. HOUSE OF RE | PRESENTATIVES, U.S. SI | ENATE, State - Dep | ot of (DOS) | | | |
| 18. Name of each ind | ividual who acted as a lobby | yist in this issue area | a | | | |
| First Name | rst Name Last Name | | Suffix Covered Official Position (if applicable) | | | New |
| Archibald | Galloway | II | Senior Defense Policy Advisor, Sen. Jeff Session | | eff Sessions | |
| Terry R. | Snell | | Senior Foreign | n Service Officer | | |
| Information U _I | odate Page - Compl | ete ONLY who | ere registra | tion information | has chang | ed. |
| 20. Client new addres | ss | | | | | |
| Address | | | | | | |
| City | | | | Zip Code | Country | у |
| 21. Client new princip | pal place of business (if diff | Ferent than line 20) | | | | |
| City | | S | tate | Zip Code | Country | у |
| 22. New General desc | cription of client's business | or activities | | | | |
| LOBBYIST UF | PDATE | | | | | |
| 23. Name of each pre | viously reported individual | who is no longer ex | pected to act as | a lobbyist for the client | | |
| First Name | Last Name | Suffix | First Name | Last Name | | Suffix |
| 1 | | 3 | | | | |
| 2 | | 4 | | | | |
| | | | _ | | | |
| ISSUE UPDAT | E | | | | | |
| 24. General lobbying | issue that no longer pertain | s | | | | |
| | | | | | | |
| | 000111111111111111111111111111111111111 | 2 | | | | |

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the registrant engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code, provide information as requested.

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Internet Address:

| Name | Street Address | dress | Principal Place of B (city and state or co | | | | | | |
|---|--|---|---|--------------------------------------|--|--|--|--|--|
| | | | City State Count | ry | | | | | |
| 26. Name of each previously reported organization that is no longer affiliated with the registrant or client | | | | | | | | | |
| 1 | 2 | 3 | | | | | | | |
| FOREIGN ENTITIES 27. Add the following foreign entities: | | | | | | | | | |
| | Address Street Address City State/Province Country | Principal place of busin (city and state or countr | | Ownership percentage in client | | | | | |
| | | City State Country | | % | | | | | |
| 28. Name of each previously reported foreign entity that no longer owns, or controls, or is affiliated with the registrant, client or affiliated organization | | | | | | | | | |
| 1 2 | 3 | 5 | | | | | | | |