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LOBBYING REPORT

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

1. Registrant Name Blue Cross & Blue Shield of Mississippi, A Mutual Insurance Company			
2. Address <input type="checkbox"/> Check if different than previously reported P. O. Box 1043 Jackson, MS 39215			
3. Principal Place of Business (if different from line 2) City Same State/Zip (or Country)			
4. Contact Name John H. Proctor III	Telephone 601-664-4475	E-mail (optional)	5. Senate I 6427
7. Client Name <input checked="" type="checkbox"/> Self			6. House II 33829

TYPE OF REPORT 8. Year 2002 Midyear (January 1-June 30) OR Year End (July 1-
9. Check if this filing amends a previously filed version of this report 10. Check if this is a Termination Report ⇨ Termination Date _____

11. No Lobb

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p align="center">12. Lobbying Firms</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ _____</p> <p align="center">Income (nearest \$20,000)</p> <p>Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income from the client (including all payments to the registrant by any other entity for lobbying activities on behalf of the client).</p>	<p align="center">13. Organizations</p> <p>EXPENSES relating to lobbying activities for this period were:</p> <p>Less than \$10,000 <input checked="" type="checkbox"/> x</p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ _____</p> <p align="right">Expenses (near</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description</p> <p><input checked="" type="checkbox"/> Method A. Reporting amounts using LDA def</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 1 Internal Revenue Code</p>
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Signature _____

Printed Name and Title Charles Pace /Governmental Affairs and Compliance

Blue Cross & Blue Shield (00030031100)
Registrant Name A Mutual Insurance Compnay Client Name SELF

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each information as requested. Attach additional page(s) as needed.

15. General issue area code INS (one per page)

16. Specific lobbying issues

S812
HR 3391

17. House(s) of Congress and Federal agencies contacted Check if None

House/Senate

18. Name of each individual who acted as a lobbyist in this issue area

Name	Covered Official Position (if applicable)
Charles Pace	

19. Interest of each foreign entity in the specific issues listed on line 16 above Check if None

Signature  Date January 27, 20

Printed Name and Title Charles Pace / Governmental Affairs and Compliance

