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LOBBYING REPORT

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

1. Registrant Name Fierce & Isakowitz			
2. Address <input type="checkbox"/> Check if different than previously reported 600 New Hampshire Avenue, NW, Suite 1000			
3. Principal Place of Business (if different from line 2) City: Washington State/Zip (or Country) DC 20037			
4. Contact Name	Telephone	E-mail (optional)	5. Senate ID #
Mark Isakowitz	(202) 333-8667	misakowitz@erols.com	44812
7. Client Name <input type="checkbox"/> Self	American Association of Preferred Providers Organization		6. House ID # 3150

TYPE OF REPORT 8. Year 2002 Midyear (January 1-June 30) OR Year End (July 1-December 31)

9. Check if this filing amends a previously filed version of this report

10. Check if this is a Termination Report ⇒ Termination Date 5/02 11. No Lobbying

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 checked="" type="checkbox"/> ⇒ \$ <u>60,000.00</u> 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 reporting period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description of</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162 Internal Revenue Code</p>
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Signature

Mark W. Isakowitz

Printed Name and Title

Mark W. Isakowitz

Registrant Name Fierce & Isakowitz Client Name American Association of Preferred Providers Organ

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

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

16. Specific lobbying issues

Patients Bill of Rights
 Medicare Reform
 Privacy

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

Senate
 House of Representatives
 HHS

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

Name	Covered Official Position (if applicable)
Fierce, Don	NA
Isakowitz, Mark	NA
Braden, Katie	NA
Moery, Diane	NA
Poole, Samantha	NA

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

Signature *Mark W. Isakowitz* Date 7/14/02
 Printed Name and Title Mark W. Isakowitz

