Clerk of the House of Representatives Legislative Resource Center B-106 Cannon Building Washington, DC 20515 Clerk of the House of Representatives Secretary of the Senate Office of Public Records 232 Hart Building Washington, DC 20510 Clerk of the House of Representatives Secretary of the Senate Office of Public Records 232 Hart Building Washington, DC 20510 Clerk of the House of Representatives Secretary of the Senate Office of Public Records 232 Hart Building Washington, DC 20510 Clerk of the House of Representatives Secretary of the Senate Office of Public Records 232 Hart Building Washington, DC 20510 Clerk of the House of Representatives Secretary of the Senate Office of Public Records 232 Hart Building Washington, DC 20510 Clerk of the House of Representatives Secretary of the Senate Office of Public Records 232 Hart Building Washington, DC 20510

1 Designment Manage	
1. Registrant Name Covington & Burling	
2. Address Check if different than previously reported. 1201 Pennsylvania Avenue, N.W.	······································
3. Principal Place of Business (if different from line 2)	
City: Washington 4 Contact Name Telephone Fr	State/Zip (or Country) DC
4. Contact Name Telephone En Roderick A. DeArment 202-662-5900 rd	(opnonal) $= 13. Schatc id #$
7. Client Name Self Association of American Medical Colleges	6. House ID # 31827006
TYPE OF REPORT 8. Year 2001 Midyear (January	1-June 30) OR Year End (July1-December 3
9. Check if this filing amends a previously filed version	of this report
10. Check if this is a Termination Report ☐ ⇒ Termi	ination Date 11. No Lobbying Act
INCOME OR EXPENSES - Complete Either Li	ne 12 OR Line 13
12. Lobbying Firms	13. Organizations
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating to lobbying activities for reporting period were:
Less than \$10,000	Less than \$10,000
\$10,000 or more \boxtimes \Rightarrow \$\frac{40,000}{\text{Income (nearest \$20,000)}}	\$10,000 or more
Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income for the client (including all payments to the registrant by any other entity for lobbying activities on behalf of the client.)	14. REPORTING METHOD. Check box to expense accounting method. See instructi description of options.
	Method A. Reporting amounts using LD/definitions only
	Method B. Reporting amounts under sect 6033(b)(8) of the Internal Rev Code
	Method C. Reporting amounts under 162 Internal Revenue Code

Printed Name and Title Roderick A. DeArment Filing #13d64364-1c78-4d48-8e51-7c6dac7bfb68 - Page 1 of 6

Filing #13d64364-1c78-4d48-8e51-7c6dac7bfb68 - Page 2 of 6	

Registrant Name	Covington & Burling	Client Name	Association of American Medic Colleges
registrant engaged i	CTIVITY. Select as many	codes as necessary to ent during the reporting	reflect the general issue areas in very geriod. Using a separate page ded.
15. General issue ε	area code <u>HCR</u>	(one per page)	
16. Specific lobby	ing issues		
 Funding for bio Medical Innova 			
17. House(s) of Co	ngress and Federal agencies co	ntacted	Check if None
House of Represen Senate Department of Hea	itatives alth and Human Services		
18. Name of each	individual who acted as a lobby	rist in this issue area	
	Name	Covered Offic	cial Position (if applicable)
Roderick A. DeAri	ment		.1
	n foreign entity in the specific is		
Signature		D	ateAugust 10, 2001

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	11	

By Go

Information Upda	te Page - Comple	te ONLY where registration	information has change	e d.
20. Client new address	2			
21. Client new principal	place of business (i	f different from line 20)		
City 22. New general descrip	tion of client's busin	State/Zip	(or Country)	***************************************
LOBBYIST UPDA 23. Name of each previo		dual who is no longer expecte	d to act as a lobbyist for	the cli
ISSUE UPDATE 24. General lobbying issues	ues previously repor	ted that no longer pertain		_
AFFILIATED OR 25. Add the following at				
Name		Address	Principal Place of (city and state or	
26. Name of each previous	usly reported organiz	zation that is no longer affilia	ted with the registrant or	client
FOREIGN ENTITIE 27. Add the following for				
Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	Ow pera clie
28. Name of each previous registrant, client or a		n entity that no longer owns, on	or controls, or is affiliate	d witl

Printed Name and Title

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