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# LOBBYING REPORT

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

1. Registrant Name <i>Susan Polan</i>	
2. Address <input type="checkbox"/> Check if different than previously reported <i>1807 California St. NW #204</i>	
3. Principal Place of Business (if different from line 2) City: <i>Washington</i> State/Zip (or Country) <i>DC 20009</i>	
4. Contact Name	Telephone
E-mail (optional)	
5. Senate ID # <i>54860</i>	
7. Client Name <input type="checkbox"/> Self <i>Public Interest Projects</i>	
6. House ID # <i>35093000</i>	

TYPE OF REPORT 8. Year 2001 Midyear (January 1-June 30)  OR Year End (July 1-December)

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

10. Check if this is a Termination Report  Termination Date April 15, 2001

11. No Lobbying /

**INCOME OR EXPENSES - Complete Either Line 12 OR Line 13**

<p><b>12. Lobbying Firms</b></p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ 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><b>13. Organizations</b></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><b>14. REPORTING METHOD.</b> Check box to indicate accounting method. See instructions for description of method.</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(e) Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code</p>
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Signature *Susan L Polan*

Printed Name and Title <sup>v</sup> Susan Polan Consultant

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PA

Registrant Name Susan Polan Client Name Public Interest Proj

**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. Attach additional page(s) as needed.

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

16. Specific lobbying issues

Funding for public health initiatives

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

House of Representatives

U.S. Senate

Centers for Disease Control & Prevention

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

Name	Covered Official Position (if applicable)
<u>Susan Polan</u>	

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

Signature [Signature] Date 2 Aug 01

Printed Name and Title JULIAN TULAN

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Registrant Name Susan Polan Client Name Public Interest Project

**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. Attach additional page(s) as needed.

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

16. Specific lobbying issues

Nationwide health tracking

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

House of Representatives  
U.S. Senate  
Centers for Disease Control & Prevention

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

Name	Covered Official Position (if applicable)
<u>Susan Polan</u>	

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

Signature [Signature] Date 02 Aug 01

Printed Name and Title <sup>U</sup> ⊖ Susan C. Polan consultant <sup>U</sup>

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