

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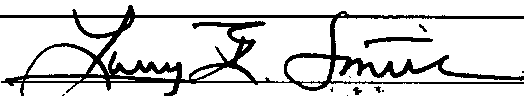
LOBBYING REPORT

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

1. Registrant Name The Legislative Strategies Group		
2. Address <input type="checkbox"/> Check if different than previously reported 600 – 13th Street, NW, Suite 790, Washington, D.C. 20005		
3. Principal Place of Business (if different from line 2) City: N.A. State/Zip (or Country)		
4. Contact Name Katherine Merritt	Telephone (202) 628-6870	5. Senate ID #
7. Client Name <input type="checkbox"/> Self Joint Commission of Accreditation of Healthcare Organizations		6. House ID # 34137010

9. **TYPE OF REPORT** 8. Year 2001 Midyear (January 1-June 30) **OR** Year End (July 1-Decem
10. Check if this filing amends a previously filed version of this report
11. Check if this is a Termination Report \Rightarrow Termination Date _____ 11. No Lobbying A

INCOME OR EXPENSES – Complete Either Line 12 OR Line 13	
<p>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"/> \Rightarrow \$ <u>20,000</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>13. Organizations</p> <p>EXPENSES relating to lobbying activities for this rep were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> \Rightarrow \$ _____ Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to in accounting method. See instructions for description of:</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definiti</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 603 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162 Internal Revenue Code</p>

Signature 
Printed Name and Title Larry E. Smith, President August 10, 2001



Registrant Name **The Legislative Strategies Group** Client Name **Joint Commission of Accreditation of Healthcare Organizations**

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 **HCR** (one per page)

16. Specific lobbying issues

Managed Care and Patient Protection

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

U.S. House of Representatives

U.S. Senate

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

Name	Covered Official Position (if applicable)
Denise M. Henry	
Martin B. Gold	
Larry E. Smith	
G. David Mason	
Sara Franko	
Ronna Freiburg	

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

Signature _____

Printed Name and Title **Larry E. Smith, President**



Registrant Name The Legislative Strategies Group Client Name Joint Commission of Acc. of Healthcare Organz.

Information Update Page - Complete ONLY where registration information has changed.

20. Client new address

21. Client new principal place of business (if different from line 20)

City

State/Zip (or Country)

22. New general description of client's business or activities

LOBBYIST UPDATE

23. Name of each previously reported individual who is no longer expected to act as a lobbyist for the client

Steven M. Hilton, Esq.
Allison Giles

ISSUE UPDATE

24. General lobbying issues previously reported that no longer pertain

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal Place of Bu (city and state or co

26. Name of each previously reported organization that is no longer affiliated with the registrant or client

FOREIGN ENTITIES

27. Add the following foreign entities

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities

28. Name of each previously reported foreign entity that no longer owns, or controls, or is affiliated with the registra affiliated organization

Signature



Date

August 10, 2001

Printed Name and Title

Larry E. Smith, Pres.

Date

Form LD-2 (Rev. 6/98)

Page