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LOBBYING REPORT

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

Registrant Name Barnett & Sivon, P.C.				
Address Check if different than previousl				
Principal Place of Business (if different from line City: Washington		p (or Country) D.C. 20005		
Contact Name James C. Sivon	Telephone (202) 463-6040	E-mail (optional) jsivon@barnett-sivon.com	5. Senate ID #	
Client Name Self American Bankers Insurance Association				
			1. No Lobby	
Check if this filing amends a previously Check if this is a Termination Report INCOME OR EXPENSES -	☐ ⇒ Termination Complete Either	Date1 Line 12 OR Line 13		
O. Check if this is a Termination Report INCOME OR EXPENSES - 12. Lobbying Firms INCOME relating to lobbying activities	☐ Termination Complete Either s	Line 12 OR Line 13 13. Organiza EXPENSES relating to lobbying active period were:	tions	
12. Lobbying Firms INCOME relating to lobbying activities period was:	☐ Termination Complete Either s	Line 12 OR Line 13 13. Organiza EXPENSES relating to lobbying active period were: Less than \$10,000		
INCOME OR EXPENSES - 12. Lobbying Firms INCOME relating to lobbying activities period was: Less than \$10,000	Termination Complete Either s for this reporting \$20,000.00 (nearest \$20,000) the nearest \$20,000, client (including all	Line 12 OR Line 13 13. Organiza EXPENSES relating to lobbying active period were: Less than \$10,000	enses (nearest \$2 ck box to indiction description sing LDA def	

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Signature ////// C Printed Name and Title	James C. Sivon, Vice President and Secretary
LD-2 (REV. 6/98)	

Registrant Name	Barnett & Sivon, P.C.	Client Name	American Bankers Insurance Association
engaged in lobbying	VITY. Select as many on behalf of the client ested. Attach additional	during the reporting period.	t the general issue areas in which the Using a separate page for each cod
15. General issue a	rea code BAN	(one per page)	
16. Specific lobbyi			
Optional federal	regulation of insurance		
17. House(s) of Co	ongress and Federal age	ncies contacted \Box	Check if None
House of Rep Senate			
18. Name of each	individual who acted as	s a lobbyist in this issue area	
James C. Sivon	Name	Vice Pre	Covered Official Position (if applicable)
100100386*			
19. Interest of each	h foreign entity in the spec	ific issues listed on line 16 abo	ve Check if None
Signature		06-a1d4-474c502eefeb - Page	Date 2/14/03

Form LD-2 (Rev.6/98)

Pag