

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

SECRETARY OF
02 AUG 14

LOBBYING REPORT

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

1. Registrant Name Lupus Foundation of America, Inc.			
2. Address <input type="checkbox"/> Check if different than previously reported 1300 Piccard Drive, Suite 200			
3. Principal Place of Business (if different from line 2) City: Rockville State/Zip (or Country) MD 20850-4303			
4. Contact Name Duane Peters	Telephone (301) 670-9292	E-mail (optional) peters@lupus.org	5. Senate ID # 23
7. Client Name <input checked="" type="checkbox"/> Self			6. House ID # 32

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

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

10. Check if this is a Termination Report ⇒ Termination Date _____

11. No Lobbyi

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms
INCOME relating to lobbying activities for this reporting period was:
Less than \$10,000
\$10,000 or more ⇒ \$ _____
Income (nearest \$20,000)

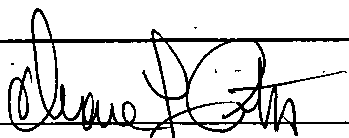
Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income from the client (including all payments to the registrant by any other entity for lobbying activities on behalf of the client).

13. Organizations
EXPENSES relating to lobbying activities for this period were:
Less than \$10,000
\$10,000 or more ⇒ \$ 20,000.00
Expenses (nearest \$

14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description

- Method A. Reporting amounts using LDA def
 Method B. Reporting amounts under section 6 Internal Revenue Code
 Method C. Reporting amounts under section Internal Revenue Code

Signature



Printed Name and Title Duane L. Peters, Vice President for Advocacy & Communications

LD-2 (REV. 6/98)

Registrant Name Lupus Foundation of America, Inc. Client Name _____

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the 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

Appropriations for DHHS, OWH, CDC, FDA, NIH, NIAMS, NIDDK, NHLB, NIAID, NIEHS
Appropriations for Title V of P.L. 106-505, Lupus Research & Care Amendments of 2000
Appropriations for the establishment of a Lupus National Patient Registry
Authorization for the creation of a Federal Working Group on Lupus
FDA approval of new drug candidate GL701 (Aslera)
Prescription drug benefit for Medicare beneficiaries
Revisions to Social Security Disability eligibility regulations

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

U.S. House & U.S. Senate, Appropriations Committees, Labor HHS Subcommittees.
Department of Health & Human Services, OWH, NIH, CDC, FDA
The White House, OMB, Domestic Policy Council

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

Name	Covered Official Position (if applicable)
Duane L. Peters	Vice President for Advocacy & Communications

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

Signature  Date 08/07/2002

Registrant Name Lupus Foundation of America, Inc. Client Name _____

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

Ellen Ignatius

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 E (city and state or c


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 regis affiliated organization

Signature  Date 08/07/02

Printed Name and Title Duane L. Peters, Vice President for Advocacy & Communications

Form LD-2 (Rev. 6/98)

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