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LOBBYING REPORT AM11:

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

1. Registrant name
Hogan & Hartson LLP

2. Address Check if different than previously reported
Columbia Square 555 13th Street NW
Washington DC 20004 USA

3. Principal place of business (if different than line 2)
City _____ State/Zip or Country _____

4a. Contact Name Mr. Christine M. Warnke	b. Telephone number 202-637-5645	c. E-mail CMWarnke@HHLAW.com	5. Senate ID # 18422-4810
7. Client Name <input type="checkbox"/> Self National Association of Home Health Care and Hospice			6. House ID # 30470349

TYPE OF REPORT 8. Year 2006 Midyear (January 1-June 30) OR Year End (July 1-December 31)

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 Lobbying Activity

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"/> ⇨ \$ <u>20,000</u></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 reporting period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ _____</p> <p>14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of option:</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definitions only</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) of Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Revenue Code</p>
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Edit Form > File with _____
Senate Password _____ File with _____

Signature Christine M Warnke Date 8/8/2006
Printed Name and Title Christine M. Warnke (Senior Governmental Affairs Advisor)

Developed by Christine M. Warnke
2006-08-08 12:11:00
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