

LOBBYING REPORT

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

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SECRETARY OF THE SENATE
FEB 23 AM 8:26

1. Registrant Name <u>PASS and HOWES, Inc.</u>			
2. Address <input type="checkbox"/> Check if different than previously reported <u>1818 N Street, NW, Suite 450</u>			
3. Principal Place of Business (if different from line 2) City: <u>Washington</u> State/Zip (or Country) <u>DC 20036</u>			
4. Contact Name <u>Joanne M. Howes</u>	Telephone <u>202-530-2900</u>	E-mail (optional)	5. Senate ID # <u>5528-152</u>
7. Client Name <input type="checkbox"/> Self <u>Death With Dignity-National Center</u>	6. House ID # <u>30215017</u>		

TYPE OF REPORT 8. Year 2000 Midyear (January 1-June 30) OR Year End (July 1-December 31)
Check if this filing amends a previously filed version of this report
9. Check if this is a Termination Report Termination Date _____ 11. No Lobbying Activity

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 <input checked="" type="checkbox"/> \$10,000 or more <input type="checkbox"/> ⇒ \$ _____ 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 reporting period were: Less than \$10,000 <input type="checkbox"/> \$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (nearest \$20,000) 14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options. <input type="checkbox"/> Method A. Reporting amounts using LDA definitions only <input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code <input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code
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Signature: Joanne M. Howes
Printed Name and Title: Joanne M. Howes, Principal

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.

3. General issue area code CON (one per page)

5. Specific lobbying issues

S2607
HR5544

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

House of Representatives
Senate
The White House Domestic Policy office

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

Name	Covered Official Position (if applicable)	New
William Zavarello		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

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

Signature *Joanne M. Howes* Date 2/14/01
Printed Name and Title Joanne M. Howes, Principal

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.

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

6. Specific lobbying issues

S2607
HR5544

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

House of Representatives
Senate
The White House Domestic Policy office

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

Name	Covered Official Position (if applicable)	New
William Zavarello		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

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

Signature Joanne M. Howes Date 2/11/01
 Printed Name and Title Joanne M. Howes, Principal