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## LOBBYING REPORT

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

1. Registrant Name <u>Karen A Johnson</u>			
2. Address <input type="checkbox"/> Check if different than previously reported <u>1122 Colorado Suite 300</u>			
3. Principal Place of Business (if different from line 2) City: <u>Austin</u> State/Zip (or Country) <u>TX 78701</u>			
4. Contact Name <u>Karen Johnson</u>	Telephone <u>512/478-4584</u>	E-mail (optional)	5. Senate ID #
7. Client Name <input type="checkbox"/> Self <u>American Society of Anesthesiologists</u>			6. House ID # <u>35412</u>

**TYPE OF REPORT** 8. Year 2001 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 Activities

### INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms	13. Organizations
<b>INCOME</b> relating to lobbying activities for this reporting period was:	<b>EXPENSES</b> relating to lobbying activities for this reporting period were:
Less than \$10,000 <input type="checkbox"/>	Less than \$10,000 <input type="checkbox"/>
\$10,000 or more <input checked="" type="checkbox"/> ⇒ \$ <u>100,000</u> Income (nearest \$20,000)	\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (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).	<b>14. REPORTING METHOD.</b> Check box to indicate the accounting method. See instructions for description of methods.
	<input type="checkbox"/> Method A. Reporting amounts using LDA definition
	<input type="checkbox"/> Method B. Reporting amounts under section 6033(c) Internal Revenue Code
	<input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code

Signature Karen A. Johnson

Printed Name and Title Karen A. Johnson



Registrant Name Karen A. Johnson Client Name Am. Society of Anesthetists

**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, information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

Health & Human Services proposed rule concerning nurse anesthetists and anesthesiologists.

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

The White House  
Office of Management & Budget

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

Name	Covered Official Position (if applicable)
Karen A. Johnson	

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

Signature Karen A. Johnson Date 7-28-01

Printed Name and Title Karen A. Johnson

