

LOBBYING REPORT

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

1. Registrant Name Arent Fox Kintner Plotkin & Kahn, PLLC				
2. Address <input type="checkbox"/> Check if different than previously reported 1850 Connecticut Ave., NW				
3. Principal Place of Business (if different from line 2) Washington City: _____ State/Zip (or Country) D.C. 20036-5339				
4. Contact Name Mike McNamara	Telephone 202-857-6000	E-mail (optional)	5. Senate ID # 4208-1026	
7. Client Name <input type="checkbox"/> Self American Society of Transplantation			6. House ID # 30861097	

TYPE OF REPORT 8. Year 2000 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>60,000</u> Income (nearest \$20,000)</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"/> \$ _____ Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options.</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)(3) of the Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code</p>

Signature _____

Printed Name and Title Elliott F. Portnoy, Member

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.

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

16. Specific lobbying issues
 -Renauthorization of the National Organ Transplant Act
 -FY 2001 Appropriation for the National Institutes of Health

17. House(s) of Congress and Federal agencies contacted Check if None
 U. S. House of Representatives
 U. S. Senate
 U. S. Department of Health and Human Services

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

Name	Covered Official Position (if applicable)	New
William H. Applegate		<input type="checkbox"/>
Robert J. Waters		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

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

Signature _____ Date _____

Printed Name and Title Elliott I. Portney, Member

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

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LOBBYING REPORT

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

1. Registrant Name Theodore C. Knappen			
2. Registrant Address <input type="checkbox"/> Check if different than previously reported Address 1001 G Street, N.W. Suite 400 East City Washington State/Zip (or Country) DC 20001 USA			
3. Principal Place of Business (if different from line 2) City _____ State/Zip (or Country) _____			
4. Contact Name Theodore C. Knappen	Telephone 202-638-6490	E-mail (optional) tknappen@peyser.com	5. Senate ID #
7. Client Name <input type="checkbox"/> Self Martz Group			6. House ID # 32440002

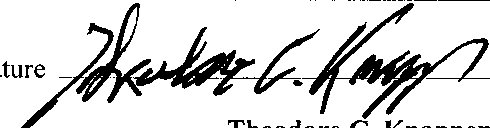
TYPE OF REPORT 8. Year 2001 Midyear (January 1-June 30) **OR** Year End (July 1-Dec

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10. Check if this is a Termination Report >> Termination Date _____ 11. No Lobbyin

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Signature 

Date 8/8/2001

