

Secretary of the Senate  
Office of Public Records  
232 Hart Building  
Washington, DC 20510

05 FEB 14 PM

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

**TYPE OF REPORT** 8. Year 2004 Midyear (January 1-June 30) ☐ OR Year End (July 1-De

10. Check if this is a Termination Report ☐. ➔ Termination Date \_\_\_\_\_.

11. No Lobby:

**12. Lobbying Firms**

**INCOME** relating to lobbying activities for this reporting period was:

Less than \$10,000 ☐

\$10,000 or more ☒ ⇒ \$ 14,574.00  
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).

**EXPENSES** relating to lobbying activities for this reporting period were:

Less than \$10,000 ☐

\$10,000 or more ☐ ⇨ \$ \_\_\_\_\_  
Expenses (nearest \$20,000)

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

☐ **Method A.** Reporting amounts using LDA definition

☐ **Method B.** Reporting amounts under section 60 Internal Revenue Code

☐ **Method C.** Reporting amounts under section 16 Internal Revenue Code

Signature \_\_\_\_\_

Printed Name and Title \_\_\_\_\_

LD-2 (REV. 4/03)

PAGE

Registrant Name Sara G. Garland Client Name National Council of Social Security Managem

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which th engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each co information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

H.R. 5006, H. Rept. 108-636, S. 2810, S. Rept. 108-345 (Labor, HHS, and Education Appropriations, FY 2005, Social Security Administration, Limitation on Administrative Expenses)  
H.R. 5025, H. Rept. 108-671, S. 2806, S. Rept. 108-342 (Transportation/Treasury Appropriations, FY 2005, Civil Service Employees Pay Raise)  
H.R. 4818, H. Rept. 108-792, P.L. 108-447 (Consolidated Appropriations, FY 2005 -- Labor, HHS, Education Appropriations, Social Security Administration, Limitation on Administrative Expenses; Transportation/Treasury Appropriations, Civil Service Employees Pay Raise)

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

U.S. Senate  
U.S. House of Representatives  
Social Security Administration  
Social Security Advisory Board

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

Name	Covered Official Position (if applicable)
Sara G. Garland	
Rachel A. Emmons	

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

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name and Title \_\_\_\_\_

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Registrant Name Sara G. Garland Client Name National Council of Social Security Managem

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which th engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each co information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

S. 129, S. 349, S. 481, S. 589, S. 1369, S. 1418, S. 1519, S. 1523, S. 1637, S. 1783, S. 1878, S. 1889, S. 2161, S. 2163, S. 2438, S. 2455, S. 2628, 2657  
H.R. 594, H.R. 1231, H.R. 2631, H.R. 2700, H.R. 2770, H.R. 2781, H.R. 2791, H.R. 2840, H.R. 2971, H.R. 2995, H.R. 3001, H.R. 3169, H.R. 3177, H.R. 3267, H.R. 3279, H.R. 3382, H.R. 3751, H.R. 3821, H.R. 3868, H.R. 3877, H.R. 4391, H.R. 4844, H.R. 4846

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

U.S. Senate  
U.S. House of Representatives  
Social Security Administration  
Office of Personnel Management

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

Name	Covered Official Position (if applicable)
Sara G. Garland	
Rachel A. Emmons	

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

Signature

*Rachel A. Emmons*

Date

2-14-

Printed Name and Title Rachel A. Emmons, Associate

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