

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

SECRETARY OF  
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## LOBBYING REPORT

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

1. Registrant Name <b>Lent Scrivner &amp; Roth LLC</b>			
2. Registrant Address <input type="checkbox"/> Check if different than previously reported Address <b>915 15th Street, N.W., Suite 800</b> City <b>Washington</b> State/Zip (or Country) <b>DC 20005</b>			
3. Principal Place of Business (if different from line 2) City _____ State/Zip (or Country) _____			
4. Contact Name <b>Norman F. Lent III</b>		Telephone <b>(202) 347-3030</b>	E-mail (optional) _____
5. Senate ID # <b>22611-277</b>			6. House ID # <b>30406026</b>
7. Client Name <input type="checkbox"/> Self <b>American Society of Anesthesiologists</b>			

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

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 Lobbyi

### 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: Less than \$10,000 <input type="checkbox"/> \$10,000 or more <input checked="" type="checkbox"/> >> \$ <u>\$120,000.00</u> Income (nearest \$20,000)	<b>EXPENSES</b> 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)
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 accounting method. See instructions for description of: <input type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definiti <input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 6033 the Internal Revenue Code <input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162(c) Internal Revenue Code

Signature \_\_\_\_\_ Date 8/14/01



Registrant Name: Lent Scrivner & Roth LLC

Client Name: American Society of Anesthesiologists

**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 MMM (one per page)

16. Specific Lobbying issues  
**H.R.2216, Supplemental Appropriations (Medicare Anesthesia Rule),  
S.332, H.R.716, Medicare Anesthesia legislation,**

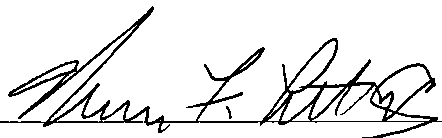
**CMS (formerly HCFA) Medicare Anesthesia Rule**

17. House(s) of Congress and Federal agencies contacted  Check if None  
**Centers for Medicare and Medicaid Services  
House of Representatives  
Senate**

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

Name	Covered Official Position (if applicable)
<b>Lent III, Norman F.</b>	
<b>Lent, Norman F.</b>	
<b>Roth, Alan J.</b>	
<b>Scrivner, Michael S.</b>	

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

Signature  Date 8/14/01

