

## LOBBYING REPORT

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

1. Registrant Name:

**AMERICAN ASSN OF NURSE ANESTHETISTS**

2. Address:

412 FIRST STREET, SE, #12, WASHINGTON, DC 20003

3. Principal place of business (if different from line 2):

4. Contact Name: FRANK J. PURCELL

Telephone: 2024848400

E-mail (optional): fpurcell@aanadc.com

Senate ID #: 1650-12

House ID #:

7. Client Name:  Self

## TYPE OF REPORT

8. Year 2007 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

### 12. Lobbying Firms

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

Less than \$10,000:

\$10,000 or more:  => 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:

\$10,000 or more:  => Expenses (nearest \$20,000): 610,000.00

### 14. Reporting Method.

Check box to indicate expense accounting method. See instructions for description of options.

**Method A.** Reporting amounts using LDA definitions only

**Method B.** Reporting amounts under section 6033(b)(8) of the Internal Revenue Code

**Method C.** Reporting amounts under section 162(e) of the Internal Revenue Code

Registrant Name: AMERICAN ASSN OF NURSE ANESTHETISTS Client Name: Self

### 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: EDU (one per page)

16. Specific lobbying issues:

HR 2959, S 1704 First Higher Education Extension Act of 2006; S 1868 Second Higher Education Extension Act of 2006; HR 3043, S 3708, FY 08 Labor HHS Education Appropriations

17. House(s) of Congress and Federal agencies contacted:

HOUSE OF REPRESENTATIVES  
HOUSE OF REPRESENTATIVES  
Health Resources & Services Administration (HRSA)  
SENATE  
SENATE

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

Name: BULLARD, BRIAN  
Covered Official Position (if applicable): N/A  
Name: PURCELL, FRANK  
Covered Official Position (if applicable): N/A

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

Registrant Name: AMERICAN ASSN OF NURSE ANESTHETISTS Client Name: Self

### 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:

HR 3043, S 1710, Labor HHS Education Appropriations; HR 2642, S 1645 Military Quality of Life and Veterans Affairs Appropriations Act; HR 3222 Defense Appropriations; HR 2580 Help Efficient Accessible Low Cost Timely Healthcare (HEALTH) Act of 2005, HR 2053 Medicare Anesthesiology Teaching Funding Restoration Act; HR 1932, Medicare Academic Anesthesiology and CRNA Payment Improvement Act of 2007; HR 2260, Healthcare Truth and Transparency Act of 2007

17. House(s) of Congress and Federal agencies contacted:

Centers For Medicare and Medicaid Services (CMS)

HOUSE OF REPRESENTATIVES

HOUSE OF REPRESENTATIVES

Health & Human Services, Dept of (HHS)

SENATE

SENATE

Veterans Affairs, Dept of (VA)

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

Name: BULLARD, BRIAN

Covered Official Position (if applicable): N/A

Name: PURCELL, FRANK

Covered Official Position (if applicable): N/A

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

Registrant Name: AMERICAN ASSN OF NURSE ANESTHETISTS Client Name: Self

### 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:

HR 3162 Children's Health and Medicare Protection Act of 2007; HR 1932 Medicare Academic Anesthesiology and CRNA Payment Improvement Act

17. House(s) of Congress and Federal agencies contacted:

Centers For Medicare and Medicaid Services (CMS)

HOUSE OF REPRESENTATIVES

HOUSE OF REPRESENTATIVES

Health & Human Services, Dept of (HHS)

SENATE

SENATE

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

Name: BULLARD, BRIAN

Covered Official Position (if applicable): N/A

Name: PURCELL, FRANK

Covered Official Position (if applicable): N/A

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

Signature: ON FILE Date: Jul 31, 2007

Printed Name and Title: FRANK J. PURCELL, SENIOR DIRECTOR OF FEDERAL GOVERNMENT AFFAIRS

**Information Update Page:**

**Complete ONLY where registration information has changed.**

**LOBBYIST UPDATE**

**23. Name of each previously reported individual who is NO LONGER expected to act as a lobbyist for the client**

**ISSUE UPDATE**

**24. General lobbying issues previously reported that NO LONGER pertain**

**AFFILIATED ORGANIZATIONS**

**25. Add the following organization(s)**

**26. Name of each previously reported organization that is NO LONGER affiliated with the registrant or client**

**FOREIGN ENTITIES**

**27. Add the following foreign entities**

**28. Name of each previously reported foreign entity the NO LONGER owns, OR controls, OR is affiliated with the registrant, client or affiliated organization**

Signature: ON FILE      Date: Jul 31, 2007

Printed Name and Title: -