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LOBBYING REPORT

SECRETARY OF THE

LOBBYING REPORT

Of AUG 1995 (Section 5) - All Filers Are Required To Complete This Page.

AM 1

 Registrant Name Covington & Burling Address	
!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!	
2. Address	
1201 Pennsylvania Avenue, N.W.	d.
1201 I chasylvama Avenue, 14. vv.	
3. Principal Place of Business (if different from line 2)	
City: Washington 4 Contact Name Talenhone F	State/Zip (or Country) DC/200
4. Contact Name Telephone I	J_{main} (optional) J_{main} J_{main}
Roderick A. DeArment 202-662-5900 r 7. Client Name Self	6. House ID #
Attorneys' Liability Assurance Society, Inc.	31827055
TYPE OF REPORT 8. Year 2001 Midyear (Januar	ry 1-June 30) 🔀 OR Year End (July1-December 3
9. Check if this filing amends a previously filed version	n of this report
9. Check if this filling afficients a previously fried version	n of this report
10. Check if this is a Termination Report ☐ ⇒ Term	nination Date 11. No Lobbying Act
INCOME OR EXPENSES - Complete Either I	Line 12 OR Line 13
^	
12. Lobbying Firms	13. Organizations
INCOME relating to lobbying activities for this	EXPENSES relating to lobbying activities for
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating to lobbying activities for reporting period were:
reporting period was:	reporting period were:
reporting period was: Less than \$10,000 \[\textstyle	reporting period were: Less than \$10,000
reporting period was:	reporting period were:
reporting period was: Less than \$10,000 \$10,000 or more \$\Bigsim\sum_{\text{Income (nearest \$20,000)}}\$	reporting period were: Less than \$10,000 □ \$10,000 or more □ □ \$
reporting period was: Less than \$10,000 \$10,000 or more \$\increc{\sigma}{\text{Income (nearest \$20,000)}}\$ Provide a good faith estimate, rounded to the nearest	reporting period were: Less than \$10,000 \$10,000 or more Expenses (nearest \$20) 14. REPORTING METHOD. Check box to
reporting period was: Less than \$10,000 \$10,000 or more \$\sim_{\text{Income (nearest \$20,000)}}\$ Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income for the client	reporting period were: Less than \$10,000 \$10,000 or more Expenses (nearest \$20) 14. REPORTING METHOD. Check box to expense accounting method. See instruct
reporting period was: Less than \$10,000 \$10,000 or more \$\increc{\text{Income (nearest \$20,000)}}{\text{Income (nearest }}\$	reporting period were: Less than \$10,000 \$10,000 or more \$\sim_{\text{Expenses (nearest \$20)}}\$ 14. REPORTING METHOD. Check box to expense accounting method. See instruction of options.
reporting period was: Less than \$10,000 \$10,000 or more \$\sim_{\text{Income (nearest \$20,000)}}\$ Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income for the client (including all payments to the registrant by any other)	reporting period were: Less than \$10,000 \$10,000 or more \$\frac{\text{\$\sum}}{\text{Expenses (nearest \$20)}}\$ 14. REPORTING METHOD. Check box to expense accounting method. See instruction description of options. \$\text{\$\text{Method A.}}\$ Reporting amounts using LDA.
reporting period was: Less than \$10,000 \$10,000 or more \$\sim_{\text{Income (nearest \$20,000)}}\$ Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income for the client (including all payments to the registrant by any other)	reporting period were: Less than \$10,000 □ \$10,000 or more □ □ \$
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reporting period was: Less than \$10,000 \$10,000 or more \$\sim_{\text{Income (nearest \$20,000)}}\$ Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income for the client (including all payments to the registrant by any other)	reporting period were: Less than \$10,000 □ \$10,000 or more □ □ \$

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Registrant Name	Covington & Burling	Client Name	Attorneys' Liability Assurance Society, Inc.
registrant engaged i	· · · · · · · · · · · · · · · · · · ·	ent during the reporting	reflect the general issue areas in vg period. Using a separate page ded.
15. General issue a	area code <u>TAX</u>	one per page)	
16. Specific lobby	ing issues		
S. 1275, Reinsuran	ce Tax Equity Act of 2001.		
17. House(s) of Co.	ngress and Federal agencies co	ntacted	☐ Check if None
House of Represen Senate	tatives		
18. Name of each	individual who acted as a lobby		oial Position (if amplicable)
	Name		cial Position (if applicable)
Roderick A. DeAri Andrew H. Friedm	 1911	Partner	
19. Interest of each	n foreign entity in the specific is	ssues listed on line 16	above
Signature			Pate August 10, 2001

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		0	nformation has change	
20. Client new address				
			ŕ	
21. Client new principal p	place of business (if di	fferent from line 20)		************
City 22. New general descript:	0.11	State/Zip (or Country)	
22. New general descript:	ion of client's business	s or activities		
LOBBYIST UPDA		l who is no longer expected	to act as a lobbyist for the	ne cli
Free Comments			To use us us a roscopist for the	10 01.
ISSUE UPDATE				
ISSUE UPDATE 24. General lobbying issue	es previously reported	that no longer pertain		
•	es previously reported	that no longer pertain		
24. General lobbying issu		that no longer pertain		-
24. General lobbying issue AFFILIATED ORG	GANIZATIONS			
AFFILIATED ORC 25. Add the following aff	GANIZATIONS			
24. General lobbying issue AFFILIATED ORG	GANIZATIONS		Principal Place of (city and state or	
AFFILIATED ORC 25. Add the following aff	GANIZATIONS		Principal Place of (city and state or	
AFFILIATED ORC 25. Add the following aff Name	GANIZATIONS iliated organization(s)	Address	(city and state or	coun
AFFILIATED ORC 25. Add the following aff Name	GANIZATIONS iliated organization(s)		(city and state or	coun
AFFILIATED ORC 25. Add the following aff Name 26. Name of each previous	GANIZATIONS iliated organization(s)	Address	(city and state or	coun
AFFILIATED ORC 25. Add the following aff Name	GANIZATIONS iliated organization(s) sly reported organization	Address	(city and state or	coun
AFFILIATED ORC 25. Add the following aff Name 26. Name of each previous	GANIZATIONS iliated organization(s) sly reported organization	Address	(city and state or	Ow
AFFILIATED ORC 25. Add the following aff Name 26. Name of each previous FOREIGN ENTITIE 27. Add the following for	Sanization(s) sly reported organization seign entities	Address ion that is no longer affiliate Principal place of business	(city and state or ed with the registrant or o	coun

Signature _____ Printed Name and Title

Roderick A. DeArment

Date ____August 10, 2001

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