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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>Patton Boggs LLP</b>	
2. Address <input type="checkbox"/> Check if different than previously report <b>2550 M Street, NW Washington, DC 20037</b>	
3. Principal Place of Business (if different from line 2) City: State/Zip (or Country)	
4. Contact Name Telephone E-mail (optional) <b>James B. Christian 202-457-6484</b>	5. Senate ID # <b>30906-140</b>
7. Client Name <input type="checkbox"/> Self <b>American Medical Security</b>	6. House ID # <b>31917007</b>

TYPE OF REPORT 8. Year 2001 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 12/31/2001 11. No Lobbying Activity

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13	
12. Lobbying Firms	13. Organizations
INCOME relating to lobbying activities for this reporting period was:  Less than \$10,000 <input checked="" type="checkbox"/>  \$10,000 or more <input type="checkbox"/> ⇒ Income (nearest \$20,000)	EXPENSES relating to lobbying activities for this re period were:  Less than \$10,000 <input type="checkbox"/>  \$10,000 or more ⇒ \$ _____ 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 anyother entity for lobbying activities on behalf of the client).	14. REPORTING METHOD. Check box to indicat expense accounting method. See instructions for desc of options.  <input type="checkbox"/> Method A. Reporting amounts using LDA definitio <input type="checkbox"/> Method B. Reporting amounts under section 6033(t the Internal Revenue Code <input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code

Signature

Printed Name and Title **James B. Christian, Partner**



Registrant Name **Patton Boggs LLP**

Client Name **American Medical Security**

**LOBBYING ACTIVITY.** Select as many 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 requested. Attach additional page(s) as needed.

15. General issue area code **INS** (one per page)

16. Specific lobbying issues

**insurance issues**

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

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

Name	Covered Official Position (if applicable)	N
Martha Kendrick	None	
John Jonas	None	
Joanne Willis	None	

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

Signature 

Date **2/13/02**

Printed Name and Title **James B. Christian, Partner**

