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LOBBYING REPORT

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

1. Registrant Name KAR Associates, Inc.			
2. Address <input type="checkbox"/> Check if different than previously reported 6534 Marlo Drive			
3. Principal Place of Business (if different from line 2) City: Falls Church State/Zip (or Country) VA 22042			
4. Contact Name Kathleen A. Ream	Telephone (703) 241-3947	E-mail (optional) kathiream@aol.com	5. Senate ID # 450
7. Client Name <input type="checkbox"/> Self National League for Nursing			6. House ID # 34537

TYPE OF REPORT 8. Year 2003 Midyear (January 1-June 30) OR Year End (July 1-December)

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

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p align="center">12. Lobbying Firms</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Income (nearest \$20,000)</p> <p>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).</p>	<p align="center">13. Organizations</p> <p>EXPENSES relating to lobbying activities for this reporting period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description of</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 1621 Internal Revenue Code</p>
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Signature 

Printed Name and Title

Kathleen A. Ream, President

LD-2 (REV. 6/98)

P

Registrant Name KAR Associates, Inc. Client Name National League for Nursing

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

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

16. Specific lobbying issues

FY 2003 & FY 2004 Appropriations for Nurse Reinvestment Act
FY 2004 NINR Appropriations

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

House of Representatives
U.S. Senate

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

Name	Covered Official Position (if applicable)
Kathleen A. Ream	

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

Signature *[Handwritten Signature]* Date 8/14/03

Printed Name and Title Kathleen A. Ream, President

Form I.D-2 (Rev.6/98)

Page _

Registrant Name KAR Associates, Inc. Client Name National League for Nursing

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

Nursing Shortage Legislation

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

Check if None

House of Representatives
U.S. Senate

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

Name	Covered Official Position (if applicable)
Kathleen A. Ream	

19. Interest of each foreign entity in the specific issues listed on line 16 above

Check if None

Signature *Kathleen A. Ream*

Date 8/14/03

Printed Name and Title Kathleen A. Ream, President

Form I.D-2 (Rev. 6/98)

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Registrant Name KAR Associates, Inc. Client Name National League for Nursing

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

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

16. Specific lobbying issues

Higher Education Act Reauthorization
Title VIII Reauthorization

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

Check if None

House of Representatives
U.S. Senate

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

Name	Covered Official Position (if applicable)
Kathleen A. Ream	

19. Interest of each foreign entity in the specific issues listed on line 16 above

Check if None

Signature *Kathleen A. Ream* Date 8/14/03

Printed Name and Title Kathleen A. Ream, President

Form LD-2 (Rev. 6/98)

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Registrant Name KAR Associates, Inc. Client Name National League for Nursing

Information Update Page - Complete ONLY where registration information has changed.

20. Client new address

21. Client new principal place of business (if different from line 20)

City

State/Zip (or Country)

22. New general description of client's business or activities

LOBBYIST UPDATE

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

Terri L. Nally
Roxanne Fulcher

ISSUE UPDATE

24. General lobbying issues previously reported that **no longer** pertain

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal Place of Business (city and state or country)


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

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	C P C

28. Name of each previously reported foreign entity that **no longer** owns, **or** controls, **or** is affiliated with the registrant affiliated organization

Signature  Date 01/17/00

Printed Name and Title Kathleen A. Ream, President

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