

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
---	--

RECEIVED  
SECRETARY OF THE SENATE  
PUBLIC RECORDS

03 APR 30 PM 2:29

**LOBBYING REGISTRATION**

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration 1. Effective Date of Registration 3/17/2003

2. House Identification Number \_\_\_\_\_ Senate Identification Number \_\_\_\_\_

**REGISTRANT**3. Registrant name Anderson Pitts, LLCAddress 101 Constitution Avenue, N.W., Suite 800City WashingtonState DCZip 20001

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

City \_\_\_\_\_

State/Zip (or Country) \_\_\_\_\_

5. Telephone number and contact name

(202) 742-4653Contact Lori A. KuhnsE-mail (optional) LoriKuh

6. General description of registrant's business or activities

Consulting/Government Relations

**CLIENT** *A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should ch*  
*labeled "Self" and proceed to line 10.*  *Self*

7. Client name American Council of Life InsurersAddress 101 Constitution Avenue, N.W., Suite 700City WashingtonState DCZip 20001

8. Principal place of business (if different from line 7)

City \_\_\_\_\_

State/Zip (or Country) \_\_\_\_\_

9. General description of client's business or activities

Insurance**LOBBYISTS**

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any p  
 this section has served as a "covered executive branch official" or "covered legislative branch official" within tw  
 acting as a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

Name	Covered Official Position (if applic
<u>Philmore B. Anderson</u>	.....
<u>James L. Pitts</u>	.....



Registrant Name Anderson Pitts, LLC Client Name American Council of Life Insurers

**LOBBYING ISSUES**

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-

BAN BNK FIN INS RET TAX

12. Specific lobbying issues (current and anticipated)

*Insurance, financial and tax.*

**AFFILIATED ORGANIZATIONS**

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the a semiannual period and in whole or in major part plans, supervises or controls the registrant's lobbying

No ⇒ Go to line 14.

Yes ↓ Complete the rest of this section for each entity the criteria above, then proceed to line 14.

Name	Address	Principal Place of Bus (city and state or cou

**FOREIGN ENTITIES**

14. Is there any foreign entity that:

- a) holds at least 20% equitable ownership in the client or any organization identified on line 13; **OR**
- b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or activities of the client or any organization identified on line 13; **OR**
- c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in tl of the lobbying activity?

No ⇒ Sign and date the registration.

Yes ↓ Complete the rest of this section for ea matching the criteria above, then sign : registration.

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

Signature

*Lorilyn H*

Date

04/24/2003

---

Printed Name and Title Lori A. Kuhns, Director of Business Operations

---

Form LD-1 (Rev. 06/98)