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LOBBYING REPORT

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

1. Registrant Name <u>Sara G. Garland</u>			
2. Address <input type="checkbox"/> Check if different than previously reported <u>418 C Street, NE, Washington, DC 20002</u>			
3. Principal Place of Business (if different from line 2) City: _____ State/Zip (or Country) _____			
4. Contact Name <u>Rachel A. Emmons</u>	Telephone <u>(202) 547-8530</u>	E-mail (optional) <u>rachele@greystonegroup.com</u>	5. Senate ID <u>1581</u>
7. Client Name <input type="checkbox"/> Self <u>Fort Abraham Lincoln Foundation</u>			6. House ID <u>3278</u>

TYPE OF REPORT 8. Year 2002 Midyear (January 1-June 30) OR Year End (July 1-

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>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>13. Organizations</p> <p>EXPENSES relating to lobbying activities for this period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (near</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description:</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA de</p> <p><input type="checkbox"/> Method B. Reporting amounts under section Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section Internal Revenue Code</p>
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Signature _____

Printed Name and Title _____

Registrant Name Sara G. Garland Client Name Fort Abraham Lincoln Four

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

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

16. Specific lobbying issues

S. 2766, S. Rept. 107-216 (Labor, Health and Human Services, and Education Appropriations, FY2003, Museum Services)

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

U.S. Senate
U.S. House of Representatives

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

Name	Covered Official Position (if applicable)
<u>Sara G. Garland</u>	

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

Signature *Rachel A. Emmons* Date 8-12-02

Printed Name and Title Rachel A. Emmons, Associate

