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LOBBYING REPORT

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

| | | | |
|---|--|------------------------|--|
| 1. Registrant Name | | | |
| Sara G. Garland | | | |
| 2. Address <input type="checkbox"/> Check if different than previously reported | | | |
| 418 C Street, NE, Washington, DC 20002 | | | |
| 3. Principal Place of Business (if different from line 2) | | | |
| City: | | State/Zip (or Country) | |
| 4. Contact Name Telephone E-mail (optional) 5. Senate ID # | | | |
| Rachel A. Emmons | | (202) 547-8530 | rachele@greystone- group.com 15816- |
| 7. Client Name <input type="checkbox"/> Self | | | 6. House ID # |
| Oglala Lakota College | | | 327820 |

TYPE OF REPORT 8. Year 2001 Midyear (January 1-June 30) OR Year End (July 1-De

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 Lobbyin

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: | EXPENSES relating to lobbying activities for this re period were: |
| Less than \$10,000 <input checked="" type="checkbox"/> | Less than \$10,000 <input type="checkbox"/> |
| \$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Income (nearest \$20,000) | \$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (nearest |
| 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). | 14. REPORTING METHOD. Check box to indicat accounting method. See instructions for description o |
| | <input type="checkbox"/> Method A. Reporting amounts using LDA defini |
| | <input type="checkbox"/> Method B. Reporting amounts under section 60: Internal Revenue Code |
| | <input type="checkbox"/> Method C. Reporting amounts under section 16: Internal Revenue Code |

Signature _____

Printed Name and Title _____



Registrant Name Sara G. Garland Client Name Oglala Lakota College

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

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

16. Specific lobbying issues

H.R. 2217, H. Rept. 107-103, S. Rept. 107-36, H. Rept. 107-234, P.L. 107-63 (Interior Appropriations, FY2002, Indian Health Services)

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

U.S. Senate

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

| Name | Covered Official Position (if applicable) |
|-----------------|---|
| Sara G. Garland | |
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19. Interest of each foreign entity in the specific issues listed on line 16 above Check if None

Signature _____ Date _____

Printed Name and Title _____

Form LD-2 (Rev. 6/98)

Pag



Registrant Name Sara G. Garland Client Name Oglala Lakota College

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 and information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

Reauthorization of Indian Health Service

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

Check if None

U.S. 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) |
|-----------------|---|
| Sara G. Garland | |
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19. Interest of each foreign entity in the specific issues listed on line 16 above

Check if None

Signature  Date 2-14-02

Printed Name and Title Rachel A. Emmons, Associate

Form LD-2 (Rev.6/98)

Pag

