

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

SECRETARY OF THE SENATE

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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>Haake and Associates</b>			
2. Address <input type="checkbox"/> Check if different than previously reported <b>1301 K Street, NW Suite 900 East Tower, Washington, DC 20005</b>			
3. Principal Place of Business (if different from line 2) City: _____ State/Zip (or Country) _____			
4. Contact Name <b>Deborah Outlaw</b>	Telephone <b>202/408-8703</b>	E-mail (optional)	5. Senate ID # <b>17226-36</b>
7. Client Name <input type="checkbox"/> Self <b>American Orthotic and Prosthetic Association</b>			6. House ID # <b>33578002</b>

TYPE OF REPORT 8. Year 1999 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 \_\_\_\_\_

11. No Lobbying Activity ☐

<b>INCOME OR EXPENSES - Complete Either Line 12 OR Line 13</b>	
<b>12. Lobbying Firms</b> INCOME relating to lobbying activities for this reporting period was: Less than \$10,000 <input type="checkbox"/> \$10,000 or more <input checked="" type="checkbox"/> → \$ <u>40,000</u> Income (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 any other entity for lobbying activities on behalf of the client).	<b>13. Organizations</b> EXPENSES relating to lobbying activities for this reporting period were: Less than \$10,000 <input type="checkbox"/> \$10,000 or more <input type="checkbox"/> → \$ _____ Expenses (nearest \$20,000) <b>14. REPORTING METHOD.</b> Check box to indicate expense accounting method. See instructions for description of options. <input type="checkbox"/> Method A. Reporting amounts using LDA definitions only <input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code <input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code

Signature T. M. Haake

Printed Name and Title Timothy M. Haake, Attorney

Registrant Name Haake and Associates Client Name American Orthotic and Prosthetic Association

**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 MMM (one per page)

16. Specific lobbying issues

Legislation to reduce abusive billing in the Medicare program;  
Budget proposals that would reduce reimbursement to orthotic and prosthetic suppliers;

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

☐ Check if None

Senate  
House of Representatives  
BCFA

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

Name	Covered Official Position (if applicable)	New
Timothy M. Haake		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

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

☐ Check if None

Signature

*T. M. Haake*

Date

*2/14/00*

Printed Name and Title

Timothy M. Haake, Attorney