000012000002

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 SUNAIL

00 FEB 14 PH 5- 26

HAND SELIVERED 🗆

LOBBYING REPORT

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

	:		
Registrant Name			
Powers, Pyles, Sutter & Verville, P.C.	· · · · · · · · · · · · · · · · · · ·		
2. Address		***************************************	
1875 Eye Street, NW 12th Floor Washington	ı, DC 20006		
3. Principal Place of Susiness (if different from line 2)			
City: State/2	Sip (or Country)		
4. Contact Name Telephone	E-mail (optional)	5. Senate 5D #	
Judith Buckalew 202-466-6550	jbuckslew@ppsv.com	32008-241	
7. Client Name Schi American Psychological Association		6. House ID# 32107023	
9. Check if this filing unends a previously filed version of this 10. Check if this is a Termination Report © Termination INCOME OR EXPENSES - Complete Either	Date	11. No Lobbying Activity C	
12. Lobbying Firms	13. Organizations		
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating to lobbying activities for this reporting period were:		
Less than \$10,000 🗀	Less than \$10,000 🖸		
20.000	\$10,000 or more 🔾 🗢 \$		
\$10,000 or more (2) \$ 5 20,000	\$10,000 or more		
Provide a good faith estimate, rounded to the nearest \$20,000,	14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options.		
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).	Method A. Reporting amounts using LDA definitions only		
	Thethod B. Reporting amounts under section 6033(b)(8)of the Internal Revenue Code		
	Method C. Reporting amounts (
Signature	;		
Printed Name and Title L. Michael Hall, Princip	>a.1.		
LD-1 (REV. 6/98)	I .	PAGE LOT 3	

000012000002

Registrant Name_	PPSV	_ Client Name American Psychological Association	
engaged in lobb	CTIVITY. Select as many codes tying on behalf of the client during requested. Attach additional page	as necessary to reflect the general issue areas in which the registrant g the reporting period. Using a separate page for each code, provide (s) as needed.	
15. General iss	ue area code BUD (one ;	per page)	
16. Specific lo			
,	propriations Appropriations		
		•	
17. House(s) o	of Congress and Federal agencies	contacted Check if None	
	•	bcommittees of the House and Senate;	
NIH; CDC		,	
		•	
18. Name of c	ach individual who acted as a lob	byist in this issue area	
	Nume	Covered Official Position (IFapplicable)	New
l. Michae	21 Hsll	Principal [ם
. Alyson M	. Haywood	Legislative Director	3
Amy É, B;		Legislative Director	ם
Kristen '	Villani	Legislative Director (
-14-11		•	
171171111171111111111111111111111111111	**************************************		
***************************************	bibbiddbi ss b.d	114714441414141414141414141414141414141	
			ם
19. Interest of	each foreign entity in the specific iss	ues listed on line 16 above	
Signaturei	I Michael &	tall Date 2/14/00	
Printed Name	and Title J. Michael Hall,	Principal	

000012000002

Client new principal place of bus			//a//ab/b/a//aa//a		
Ā	State	Zip (ar Country)	:		
New general description of clien					
			:		
OBBYIST UPDATE I. Name of each previously	raported individual who is ne	langer expected to set a	ıs a lobbyi	st for the client	······································
John L. Budetti					
			i		
	······				
SUE UPDATE	previously reported that no lo	Bast pertain	:		
. General topoling tastes (breamastà rehormen ares no to	nkei hétrau			
			<u>:</u>		
FFILIATED ORGANIZ i. Add the following affilia			:		
Name	· Nasne Ad				
				(city and state or country)	
	ļ				
6. Name of each previously	y reported organization that is	no longer affiliated wit	h the regist	rant or client	
i ·			:		
			:		
OREIGN ENTITIES	n entities				
r. And the tollowing forcing	Address	Principal place of		Amount of contribution for labbying activities	Ownership percentage in client
Add the following forms Name		(city and state or			[,
······································		(city and state or		14 1741441741141144114-14-14-1	
······································		(city and state or	:		
Name			:		
Name	ty reported foreign entity that		:	affiliated with the registr	
Name 28. Name of each previous affiliated organization	()		: : то <u>ы, ог</u> is	affiliated with the registr	
28. Name of each previous affiliated organization	charl H	he longer owns, or cont	: : то <u>ы, ог</u> is	-	-