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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>BERGSON & COMPANY</u>			
2. Address <input type="checkbox"/> Check if different than previously reported <u>190 FALLON RIDGE RD GREAT FALLS VA 22066</u>			
3. Principal Place of Business (if different from line 2) City: _____ State/Zip (or Country) _____			
4. Contact Name <u>PAUL C. BERGSON</u>	Telephone <u>703-757-9070</u>	E-mail (optional) <u>BERGSON@BERGSON.COM</u>	5. Senate ID # <u>6017-87</u>
7. Client Name <input type="checkbox"/> Self <u>INTERNATIONAL ASSN of FIRE CHIEFS</u>	6. House ID # <u>313 79006</u>		

TYPE OF REPORT 8. Year 2000 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 31 OCT 00

11. No Lobbying Activity

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13	
12. Lobbying Firms 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>20,000</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).	13. Organizations 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) 14. REPORTING METHOD. 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 Paul C. Bergson

Printed Name and Title PAUL C. BERGSON PRESIDENT

Registrant Name BERGSON & COMPANY Client Name INT'L ASSN OF FIRE CHIEFS

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 DIS (one per page)

16. Specific lobbying issues

H.R. 4690 CONSPIRACY, JUSTICE, STATE AFFAIRS

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

HOUSE
SENATE

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

Name	Current Official Position (if applicable)	New
<u>Paul C. Bergson</u>		<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 Paul C. Bergson Date 20 FEB 01
Printed Name and Title PAUL C. BERGSON, PRESIDENT