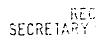
Clerk of the House of Representatives Secretary of the Senate Legislative Resource Center B-106 Cannon Building Washington, DC 20515

Office of Public Records 232 Hart Building Washington, DC 20510



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LOBBYING REPORT

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

KAR Associates, Inc.				
. Address Check if different than	previously reported			
6534 Marlo Drive				
Principal Place of Business (if different				
City: Falls Church		ip (or Country)	VA 22042	
I. Contact Name	Тејернопе		E-mail (optional)	5. Senate ID#
Kathleen A. Ream	(703) 241-3947		kathiream@aol.com	450
7. Client Name Self				6. House ID#
National League for Nursing				34537
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ŁD-2 (REV. 6/98)

Registrant Name	KAR Associates, Inc.	Client Name	National League for Nursing
engaged in lobbyin	IVITY. Select as many cod g on behalf of the client duri nested. Attach additional pages.	ng the reporting perio	ect the general issue areas in which the d. Using a separate page for each cod
15. General issue a	area code HCR (one	e per page)	
16. Specific lobby			
Nursing Shortag	ge Legislation		
		_	
	ongress and Federal agencie	s contacted	Check if None
House of Rep U.S. Senate Department of Department of	of Health & Human Services		
10 Name of each	individual urbo acted on a le	hhviet in this issue an	90
18. Name of each	individual who acted as a lo	bbyist in this issue an	ea Covered Official Position (if applicable)
18. Name of each	Nате	bbyist in this issue are	
Kathleen A. Ream Terri L. Nally	Nате	bbyist in this issue an	
Kathleen A. Ream	Nате	bbyist in this issue an	
Kathleen A. Ream	Name	bbyist in this issue an	
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Kathleen A. Ream Terri L. Nally Roxanne Fulcher	Name		Covered Official Position (if applicable)
Kathleen A. Ream Terri L. Nally Roxanne Fulcher	Name		Covered Official Position (if applicable)

Form LD-2 (Rev.6/98)

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Registrant Name_	KAR Associates, Inc.	Client Name	National League for Nursing
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15. General issu	e area code BUD (0	ne per page)	
16. Specific lobl FY 2003 Fun Reauthorizati			
House of R U.S. Senate			Check if None
18. Name of ea	ch individual who acted as a Name	loodyist iii tins issue area	Covered Official Position (if applicable)
Kathleen A. Rea			
Terri L. Nally			
Roxanne Fulch			
4.0			
19. Interest of e	ach foreign entity in the specific	issues listed on line 16 above	Check if None
Signature	thal		Date 8/12/02
Printed Name as	۱ _{ad Title} Kathleen A. Ream, Pr	esident	

Form LD-2 (Rev.6/98)