

Clerk of the House of Representatives
Legislative Resource Center
9-106 Cannon Building
Washington, DC 20515

Secretary of the Senate
Office of Public Records
332 Hart Building
Washington, DC 20510

SECRETARY OF THE SENATE

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H.D.

LOBBYING REPORT

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

1. Registrant Name <i>Eileen Meier</i>			
2. Address ☐ Check if different than previously reported <i>1090 Vermont Ave NW # 800 Washington DC 20005</i>			
3. Principal Place of Business (if different from line 2) City: _____ State/Zip (or Country) _____			
4. Contact Name <i>Eileen Meier</i>	Telephone <i>202 408-7034</i>	E-mail (optional)	5. Senate ID # <i>51503-48</i>
7. Client Name ☐ Self <i>National Association of Orthopaedic Nurses</i>	6. House ID #		

TYPE OF REPORT 8. Year _____ 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 ☐

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 ☐
\$10,000 or more ☐ ⇒ \$ _____
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 ☒
\$10,000 or more ☐ ⇒ \$ _____
Expenses (nearest \$20,000)
14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options.
☒ Method A. Reporting amounts using LDA definitions only
☐ Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code
☐ Method C. Reporting amounts under section 162(e) of the Internal Revenue Code



Signature *Eileen Meier*
Printed Name and Title *Eileen Meier Legislative Consultant*

LD-2 (REV. 6/98)

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Registrant Name Eileen Meier Client Name Montana Association of Orthopaedic Nurses

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 HCR (one per page)

16. Specific lobbying issues

Domestic Violence

Osteoporosis

Nursing Research

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

☐ Check if None

U. S. Senate

U.S. House of Representatives

U. S. Dept of Health & Human Services

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

Name	Covered Official Position (if applicable)	No.
<u>Eileen Meier</u>	<u>Legislative Consultant</u>	☐
		☐
		☐
		☐
		☐
		☐
		☐

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

☒ Check if None

Signature

Eileen Meier

Date

2/15/00

Printed Name and Title

Eileen Meier Legislative Consultant

Form LD-2 (Rev. 6/98)

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