

Clerk of the House of Representatives
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Washington, DC 20515

Secretary of the Senate
Office of Public Records
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Washington, DC 20510

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SECRETARY OF THE SENATE
05 FEB 14 PM 3:34

LOBBYING REPORT

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

1. Registrant name			
Mr.	Lee	Johnson	
2. Address <input type="checkbox"/> Check if different than previously reported			
101 Constitution Avenue, NW		Suite 525 East	
Washington	DC	20001	US
3. Principal place of business (if different than line 2)			
City		State/Zip or Country	
4a. Contact Name	b. Telephone number	c. E-mail	5. Senate ID #
Mr. Lee Johnson	202-589-1213	lee@theleejohnsongroup.com	87290
7. Client Name <input type="checkbox"/> Self			6. House ID #
College of American Pathologists			3660300

TYPE OF REPORT 8. Year 2004 Midyear (January 1-June 30) OR Year End (July 1-December)

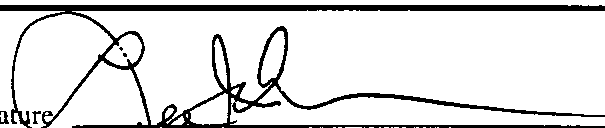
9. Check if this filing amends a previously filed version of this report

10. Check if this is a Termination Report ⇒ Termination Date 08/15/2004 11. No Lobbying Acti

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

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 <input type="checkbox"/>	Less than \$10,000 <input type="checkbox"/>
\$10,000 or more <input checked="" type="checkbox"/> ⇒ \$ <u>20,000</u>	\$10,000 or more <input type="checkbox"/> ⇒ \$ _____
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).	14. REPORTING METHOD. Check box to indicate expected accounting method. See instructions for description of options.
	<input type="checkbox"/> Method A. Reporting amounts using LDA definitions of
	<input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) Internal Revenue Code
	<input type="checkbox"/> Method C. Reporting amounts under section 162(e) of Internal Revenue Code

Signature



Date

February 11, 2005

Printed Name and Title Lee Johnson, Principal

Edit >

10/16/03

Registrant Name Lee Johnson Client Name College of American Pathologists

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each cod information as requested. Attach additional page(s) as needed.

15. General issue area code MED - Medical/Disease Research/Clinical Labs (one per page)

16. Specific lobbying issues

Utilization of the SNOMED methodology developed by the College of American Pathologists.

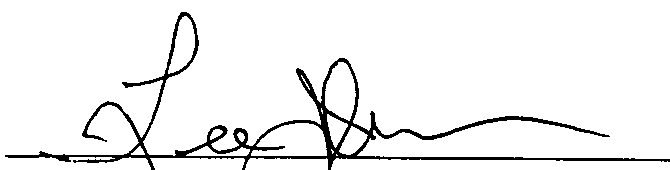
17. House(s) of Congress and Federal agencies contacted Check if None

United States Senate; United States House of Representatives; Executive Office of the President

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

Name	Covered Official Position (if applicable)
Lee Johnson	
.....
.....
.....
.....
.....
.....
.....

19. Interest of each foreign entity in the specific issues listed on line 16 above Check if None

Signature  Date February 11, 2006

Printed Name and Title Lee Johnson, Principal

LD-2DS (REV. 4/03)

Page 2

Registrant Name Lee Johnson Client Name College of American Pathologists

Information Update Page - Complete ONLY where registration information has changed.

20. Client new address

Address

21. Client new principal place of business (if different than line 20)

City

22. New general description of client's business or activities

LOBBYIST UPDATE

23. Name of each previously reported individual who is no longer expected to act as a lobbyist for the client

1

3

2

4

ISSUE UPDATE

Find the code to select below.

24. General lobbying issues that no longer pertain

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal place of Business (city and state or country)
	Address C/S/Z Address C/S/Z	

26. Name of each previously reported organization that is no longer affiliated with the registrant or client

1

2

3

FOREIGN ENTITIES

27. Add the following foreign entities

Name	Street Address City	Address State/Province Country	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	Owr perc clier

28. Name of each previously reported foreign entity that no longer owns, or controls, or is affiliated with the registrant, or affiliated organization

1

3

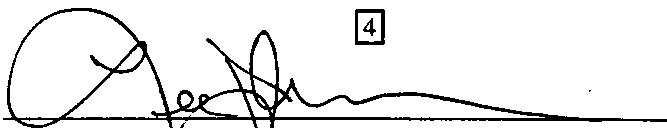
5

2

4

6

Signature



Date

February 11, 20
Add a page for initials

