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## LOBBYING REPORT

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

1. Registrant Name <b>ALAN COFFEY LLC</b>			
2. Address <input type="checkbox"/> Check if different than previously reported <b>6500 STRATTON PLACE, FALLS CHURCH, VA 22043-1823</b>			
3. Principal Place of Business (if different from line 2) City: _____ State/Zip (or Country) _____			
4. Contact Name <b>ALAN F. COFFEY, JR.</b>	Telephone <b>(703) 536-7963</b>	E-mail (optional) <b>afcoffey@msn.com</b>	5. Senate ID # <b>62574 -</b>
7. Client Name <input type="checkbox"/> Self <b>CNA INSURANCE Companies</b>			6. House ID # <b>3545206</b>

**TYPE OF REPORT** 8. Year 2002 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 12/31/02

11. No Lobbying Act

### INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms	13. Organizations
<p><b>INCOME</b> relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Income (nearest \$20,000)</p> <p>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).</p>	<p><b>EXPENSES</b> relating to lobbying activities for this reporting period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (nearest \$20,000)</p> <p><b>14. REPORTING METHOD.</b> Check box to indicate reporting method. See instructions for description of method.</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(c) Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code</p>

Signature Alan F. Coffey, Jr.

Printed Name and Title **ALAN F. COFFEY, JR.**

**PRESIDENT / MANAGER**



Registrant Name ALAN COFFEY LLC Client Name CNA INSURANCE COMPANY

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

15. General issue area code INS (one per page)

16. Specific lobbying issues

CLASS ACTION FAIRNESS (H.R. 2341; S. 1712)


TERRORISM REINSURANCE (H.R. 3210; Pub. L. 107-297)

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

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

Name	Covered Official Position (if applicable)
<u>ALAN F. COFFEY, JR.</u>	

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

Signature  Date 1/16/03  
Printed Name and Title ALAN F. COFFEY, JR. PRESIDENT/MANAGER

