

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

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

SECRETARY OF THE SENATE  
05 FEB 14 PM 3:04

## LOBBYING REPORT

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

1. Registrant Name <b>American Continental Group, Inc.</b>			
2. Registrant Address <input type="checkbox"/> Check if different than previously reported Address <b>2099 Pennsylvania Avenue, NW</b> Suite <b>850</b> City <b>Washington</b> State/Zip (or Country) <b>DC 20006</b> <b>United States</b>			
3. Principal Place of Business (if different from line 2) City _____ State/Zip (or Country) _____			
4. Contact Name Telephone E-mail (optional) <b>Shawn Smeallie</b> <b>202-419-2500</b> <b>smeallie@acgprep.com</b>			5. Senate ID #
7. Client Name <input type="checkbox"/> Self <b>Shalom Hospice Healthcare, LLC</b>			6. House ID #

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

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 Lobby:

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

12. Lobbying Firms	13. Organizations
<b>INCOME</b> relating to lobbying activities for this reporting period was:	<b>EXPENSES</b> 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>\$40,000.00</u> Income (nearest \$20,000)	\$10,000 or more <input type="checkbox"/> >> \$ _____ Expenses (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).	<b>14. REPORTING METHOD.</b> Check box to indicate accounting method. See instructions for description of
	<input type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definition
	<input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 6033 the Internal Revenue Code
	<input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162(c) Internal Revenue Code

Signature \_\_\_\_\_ Date 2/1/2005

Printed Name and Title Beth Anne Cole - Business Manager \_\_\_\_\_ Pag

Registrant Name: American Continental Group, Inc.

Client Name: Shalom Hospice Healthcare, LLC

**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  
**Chronic Care Initiative**

- 17. House(s) of Congress and Federal agencies contacted  Check if None  
**Department of Health & Human Services**  
**House of Representatives**  
**Senate**

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

Name	Covered Official Position (if applicable)
<b>Holman, Sonia</b>	
<b>Smeallie, Shawn</b>	

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

*[Handwritten Signature]*

