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LOBBYING REPORT

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

1. Registrant name Morrison Public Affairs Group			
2. Address <input type="checkbox"/> Check if different than previously reported 6004 Onondaga Road Bethesda MD 20816 US			
3. Principal place of business (if different than line 2) City _____ State/Zip or Country _____			
4a. Contact Name Mr. Bruce A. Morrison		b. Telephone number 301-263-1142	c. E-mail b.a.m@att.net
			5. Senate ID # 67193-22
7. Client Name <input type="checkbox"/> Self American Hospital Association			6. House ID # 3565601

TYPE OF REPORT 8. Year 2005 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 _____ 11. No Lobbying Activity

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13	
<p>12. Lobbying Firms</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> ⇌ \$ <u>60,000</u></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>13. Organizations</p> <p>EXPENSES relating to lobbying activities for this reporting were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇌ \$ _____</p> <p>14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options.</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definitions on Internal Revenue Code</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) of Internal Revenue Code</p>

Edit Form >

Signature Bruce A. Morrison Date 2/14/06

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Registrant Name Morrison Public Affairs Group

Client Name American Hospital Association

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the registrant is 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 IMM - Immigration (one per page)

16. Specific lobbying issues

Immigration policy for healthcare workers.

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

- 1. House of Representatives
- 2. Senate
- 3. Department of State
- 4. Department of Homeland Security

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

Name			Covered Official Position (if applicable)
Bruce	Morrison	A.	
Stephen	Hudak	P.	

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

Signature _____ Date _____

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Printed Name and Title Bruce A. Mottson, Chairman, Mottson Public Affairs Group

LD-2DS (Rev. 4.06)

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Registrant Name Morrison Public Affairs Group

Client Name American Hospital Association

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

20. Client new address

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

City

State/Zip

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

Stephen Hudak P.

ISSUE UPDATE

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)

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

FOREIGN ENTITIES

27. Add the following foreign entities

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	Own perc client

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

Signature _____ Date _____

Printed Name and Title Bruce A. Morrison, Chairman, Morrison Public Affairs Group

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