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LOBBYING REPORT

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

1. Registrant Name American Optometric Association			
2. Address <input type="checkbox"/> Check if different than previously reported 1505 Prince Street, Suite 300			
3. Principal Place of Business (if different from line 2) City: Alexandria State/Zip (or Country) VA			
4. Contact Name Darlene Kuny	Telephone 703-739-9200	E-mail (optional) DFKuny@aoa.org	5. Senate ID # 2981-12
7. Client Name <input type="checkbox"/> Self			6. House ID # 31099000

TYPE OF REPORT 8. Year _____ 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 Act

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13	
<p align="center">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 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 align="center">13. Organizations</p> <p>EXPENSES 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"/> ⇨ \$ <u>257,978</u> Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description of options.</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b) Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code</p>

Signature *Jeffrey G. Mays*
Printed Name and Title Jeffrey G. Mays, Deputy Executive Director



Registrant Name American Optometric Assn Client Name Self

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 DEF (one per page)

16. Specific lobbying issues

HR 2586 S 1438
HR 3338

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

House of Representatives
Senate

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

Name	Covered Official Position (if applicable)
Jeffrey G. Mays	
David S. Danielson	
Alan Peterson	

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

Signature  Date 2/13/02

Printed Name and Title Jeffrey G. Mays, Deputy Executive Director



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

16. Specific lobbying issues

HR 2563 S 1052
HR 3061 S 1533
 S 1536

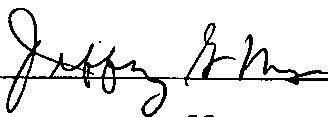
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15. General issue area code IND (one per page)

16. Specific lobbying issues

S 212

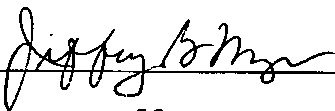
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15. General issue area code MMM (one per page)

16. Specific lobbying issues

HR 3351 S 1707

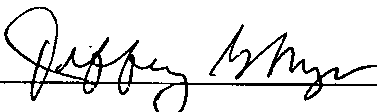
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15. General issue area code VET (one per page)

16. Specific lobbying issues

HR 2620 S 456
 S 564
 S 1216

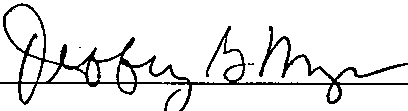
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