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LOBBYING REPORT

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

1. Registrant Name American Continental Group			
2. Address <input type="checkbox"/> Check if different than previously reported 701 Pennsylvania Avenue, N.W., Suite 250 Washington, DC 20004			
3. Principal Place of Business (if different from line 2) City: _____ State/Zip (or Country) _____			
4. Contact Name Krista Ritacco	Telephone (202) 347-6443	E-mail (optional) Ritacco@acgrp.com	5. Senate ID # 2057-455
7. Client Name <input type="checkbox"/> Self Corporation for Advancement of Medical Technologies	6. House ID # 31648040		

TYPE OF REPORT 8. Year **1998** 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 **12/31/99** 11. No Lobbying Activity

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13	
12. Lobbying Firms INCOME relating to lobbying activities for this reporting period was: Less than \$10,000 <input checked="" type="checkbox"/> \$10,000 or more <input type="checkbox"/> <u> </u> Income (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).	13. Organizations EXPENSES relating to lobbying activities for this reporting period was: Less than \$10,000 <input type="checkbox"/> \$10,000 or more <input type="checkbox"/> <u> </u> Expenses (nearest \$20,000) 14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options. <input type="checkbox"/> Method A. Reporting amounts using LDA definitions only <input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code <input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code

Signature _____

Printed Name and Title **David A. Metzner** **Managing Director**

Form LD-2 (REV. 6/98) Page 1 of 2

LD2-126

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

VA Funding.

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

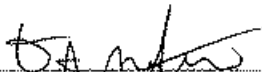
**U.S. House of Representatives
U.S. Senate**

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

Name	Covered Official Position (if applicable)	New
Metzner, David		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

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

None

Signature  Date 2/1/2000

Printed Name and Title David A. Metzner Managing Director

Form LD-2 (Rev. 6/98) Page 2 of 2