

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

Secretary of the Senate  
Office of Public Records  
232 Hart Building  
Washington, D.C. 20510

SECRETARY

02 AUG -7

**LOBBYING REPORT**

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

|   |                           |  |                            |
|---|---------------------------|--|----------------------------|
| 1. Registrant Name<br><br>Hogan & Hartson L.L.P.  |                           |  |                            |
| 2. Address <input type="checkbox"/> Check if different than previously reported<br>Columbia Square, 555 Thirteenth Street, N.W.<br>Washington DC 20004-1109 |                           |  |                            |
| 3. Principal Place of Business (if different from line 2)<br>City   |                           | State/Zip (or Country)                   |                            |
| 4. Contact Name<br>Bumpers, M. Brooke   | Telephone<br>202-637-5800 | E-mail (optional)<br>MBBumpers@HHLAW.com | 5. Senate ID #<br>18422-51 |
| 7. Client name <input type="checkbox"/> Self<br>American Academy of Pediatrics  |                           |  | 6. House ID #<br>30470000  |

**TYPE OF REPORT** 8. Year 2002 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 Lobbying

**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"/> ⇒ \$ _____<br/>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 report were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____<br/>Expenses (nearest \$20,000)</p> <p>14. <b>REPORTING METHOD.</b> Check box to indicate accounting method. See instructions for description of options.</p> <p><input type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definitive method</p> <p><input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 60 Internal Revenue Code</p> <p><input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162(c) Internal Revenue Code</p> |

Signature Brooke Bumpers Date Aug 6, 2002

Printed Name and Title Bumpers, M. Brooke Counsel

11/20/2020

Registrant Name Hogan & Hartson L.L.P. Client Name American Academy of Pediat

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

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

16. Specific lobbying issues

Food/drug reform legislation regarding pediatric labeling; extension of vaccine surcharge

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) |
|--------------------|---|
| Bumpers, M. Brooke |   |
| Loeb, Laura E.     |   |
|                    |   |
|                    |   |
|                    |   |
|                    |   |
|                    |   |
|                    |   |

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

Signature *Brooke Bumpers*

Printed Name and Title Bumpers, M. Brooke Counsel



Registrant Name Hogan & Hartson L.L.P. Client Name American Academy of Pediatrics

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

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

16. Specific lobbying issues  
Food and drug reform legislation pediatric labeling; extension vaccine surcharge

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) |
|--------------------|---|
| Bumpers, M. Brooke |   |
| Loeb, Laura E.     |   |
|                    |   |
|                    |   |
|                    |   |
|                    |   |
|                    |   |
|                    |   |

Signature *Brooke Bumpers*  
Printed Name and Title Bumpers, M. Brooke Counsel



Registrant Name Hogan & Hartson L.L.P. Client Name American Academy of Pediat

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

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

16. Specific lobbying issues

Food and drug reform legislation regarding pediatric labeling; extension of the vaccine surcharg

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) |
|--------------------|---|
| Bumpers, M. Brooke |   |
| Loeb, Laura E.     |   |
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Signature *Brooke Bumpers*

Printed Name and Title Bumpers, M. Brooke Counsel



Registrant Name Hogan & Hartson L.L.P. Client Name American Academy of Pediatrics

**Information Update Page — Complete ONLY where registration information has changed.**

20. Client new address

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

City

State/Zip (or Country)

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

**ISSUE UPDATE**

24. General lobbying issues previously reported that **no longer** apply

**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 |
|------|---------|---|--|
|      |         |   |  |

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

Signature *Brooke Bumpers*

Printed Name and Title Bumpers, M. Brooke Counsel

