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LOBBYING REPORT

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

1. Registrant Name		
Defense Health Adv	isors Inc	
2. Address Check if different than proviously reported		
1717 Pennsulvania Ar	e NW Suite 1300	
3. Principal Place of Duriness (if different from line 2)		
city: Washington / sour	Ep (or Country) DC 20006	
4. Contact Name Telephone	E-mail (optional) 5. Senate 10 #	
Charlote L. Tsoucalas Jayly53	-6528 cHvale201. 11891-63	
7. Client Name Q Self	c.Om 6. House ID#	
Phrma	33877005	
	S	
TYPE OF REPORT 8. Year 2000 Midyear (January 1-June 30) S OR Year End (July 1-December 31)		
9. Check if this filing amends a previous filed version of this report		
10. Check if this is a Termination Scripts of Termination Date 6-30-00 11. No Lobbying Activity		
INCOME OR EXPENSES Complete Either Line 12 OR Line 13		
12. Lobbying Firms	13. Organizations	
INCOME relating to lobbying activities for this reporting	EXPENSES relating to lobbying activities for this reporting	
period was:	period were:	
Less than \$10,000 @	Less than \$10,000 U	
\$10,000 or more	\$10,000 or more	
Biscome (neurost \$20,000)	14. REPORTING METHOD. Check box to indicate expense	
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).	accounting method. See instructions for description of options.	
	Method A. Reporting amounts using LDA definitions only	
	Method B. Reporting amounts under section 6033(b)(8)of the Internal Revenue Code	
	Method C. Reporting amounts under section 162(e) of the Internal Revenue Code	
Signature Charlotte L Isoricalas		
Printed Name and Title Charlotte L. Tsouca las President		
ED-2 (REV. 6/98)	PAGE Lot 2	

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Registrant Name Delense Health Advisorschient Na	ime Phema
LOBBYING ACTIVITY. Select as many codes as necessating aged in lobbying on behalf of the client during the report information as requested. Attach additional page(s) as needed.	ing period. Using a separate page for each code, provide
15. General issue area code DEF (one per page)	
16. Specific lobbying issues	
•	
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)
	ļo
. Constitution of the control of the	
THE RESIDENCE OF THE PROPERTY	
NAMES OF THE OWNER, TH	
19. Interest of each foreign entity in the specific issues listed on l	ine 16 above Check if None
Signature Charlotte & Isouca	les Dec. 20, 2000
Printed Name and Title Charlotte L.	Tsoucalas President
Form LD-2 (Rev.6/98)	Page 2 of 2