

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

Secretary of the Senate  
Office of Public Records  
232 Hart Building  
Washington, DC 20510

SECRETARY OF THE SENATE

02 FEB -7 PM 5: 23

## LOBBYING REPORT

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

1. Registrant Name <b>The Legislative Strategies Group</b>		
2. Address <input type="checkbox"/> Check if different than previously reported <b>600 – 13<sup>th</sup> Street, NW, Suite 790, Washington, D.C. 20005</b>		
3. Principal Place of Business (if different from line 2) City: <b>N.A.</b> State/Zip (or Country)		
4. Contact Name <b>Katherine Merritt</b>	Telephone <b>(202) 628-6870</b>	E-mail (optional) 5. Senate ID #
7. Client Name <input type="checkbox"/> Self <b>Joint Commission of Accreditation of Healthcare Organizations</b>		6. House ID # <b>34137010</b>

9. **TYPE OF REPORT** 8. Year 2001 Midyear (January 1-June 30)  OR Year End (July 1-December)  
10. Check if this filing amends a previously filed version of this report  
11. Check if this is a Termination Report   Termination Date \_\_\_\_\_ 11. No Lobbying A

INCOME OR EXPENSES – Complete Either Line 12 OR Line 13	
12. Lobbying Firms	13. Organizations
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating to lobbying activities for this reporting period were:
Less than \$10,000 <input type="checkbox"/>	Less than \$10,000 <input type="checkbox"/>
\$10,000 or more <input checked="" type="checkbox"/> ⇒ \$ <u>20,000</u> Income (nearest \$20,000)	\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (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).	14. <b>REPORTING METHOD.</b> Check box to indicate accounting method. See instructions for description of <input type="checkbox"/> Method A. Reporting amounts using LDA definition <input type="checkbox"/> Method B. Reporting amounts under section 603 Internal Revenue Code <input type="checkbox"/> Method C. Reporting amounts under section 162 Internal Revenue Code

Signature



Printed Name and Title

**Larry E. Smith, President**

**February 7, 2002**



Registrant Name The Legislative Strategies Group Client Name Joint Commission of Accreditation of Healthcare Organizations

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

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

16. Specific lobbying issues

Managed Care and Patient Protection

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)
Denise M. Henry	
Martin B. Gold	
Larry E. Smith	
G. David Mason	
Sara Franko	
Ronna Freiburg	

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

Signature \_\_\_\_\_

Printed Name and Title Larry E. Smith, President February 7, 2002



Registrant Name

The Legislative Strategies Group

Client Name

Joint Commission on the Health Care Organization

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

G. David Mason

ISSUE UPDATE

24. General lobbying issues previously reported that no longer pertain

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal Place of B (city and state or c

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 regist affiliated organization

Signature

*Larry E. Smith*

February 7,

Date

Printed Name and Title

Larry E. Smith, President

