

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

RECEIVED
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LOBBYING REPORT

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

1. Registrant name			
Organization <u>Susan Emmer, Emmer Consulting, P.</u>			
2. Address <input checked="" type="checkbox"/> Check if different than previously reported			
Address <u>7713 Oldchester Rd,</u>			
City <u>Bethesda</u>	State <u>MD</u>	Zip Code <u>20817</u>	Country <u>USA</u>
3. Principal place of business (if different than line 2)			
City	State	Zip Code	Country
City State/Zip or Country			
4a. Contact Name		b. Telephone number	c. E-mail
Prefix	Full Name		
Mr.	Susan Emmer	301 320 3873	emmerconsulting@verizon.net
7. Client Name <input type="checkbox"/> Self			5. Senate ID #
<u>Natl Hospice & Palliative Care Organization</u>			<u>51753-36</u>
			6. House ID #
			<u>3481400</u>

TYPE OF REPORT 8. Year 2005 Midyear (January 1-June 30) ☒ OR Year End (July 1-December 3)

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 Activity ☐

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p>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 checked="" type="checkbox"/> ⇒ \$ <u>40,000</u></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>13. Organizations</p> <p>EXPENSES relating to lobbying activities for this reporting period were:</p> <p>Less than \$10,000 <input checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____</p> <p>14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of option</p> <p><input checked="" type="checkbox"/> Method A. Reporting amounts using LDA definitions only</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) c Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Revenue Code</p>
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Form Con

Printed Name and Title

Susan Emmer, President, Emmer Consulting, P.C.

0000452728



Registrant Name

Susan Emmer

Client Name

Nari Hospice & P
Care Organizer

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the r 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

HCR

(one per page)

16. Specific lobbying issues

Add page to continue specific issues description for this issue

Medicare budget payment
legislation

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

Add a page to continue adding lobbyists for thi

First Name	Name Last Name	Suffix	Covered Official Position (if applicable)

19. Interest of each foreign entity in the specific issues listed on line 16 above

☐ Check if None

Add a page for a differer

Printed Name and Title

Susan Emmer, President, Emmer
Consulting

LD-2DS (R)



✓

Registrant Name Susan Emmer Client Name Nati Hospice & Palliative Care

Information Update Page - Complete ONLY where registration information has changed.

20. Client new address

Address 7713 Oldchester Rd
 City Bethesda State MD Zip Code 20817 Country U

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

City _____ State _____ Zip Code _____ Country _____

22. New general description of client's business or activities

Office move Policy & lobbying represen

LOBBYIST UPDATE

23. Name of each previously reported individual who is no longer expected to act as a lobbyist for the client

First Name	Last Name	Suffix	First Name	Last Name	Suffix
<u>1</u>			<u>3</u>		
<u>2</u>			<u>4</u>		

ISSUE UPDATE

Find the code to select below.

24. General lobbying issues that no longer pertain

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal place of Business (city and state or country)
	Address C/S/Z	City State Country
	Address C/S/Z	City State

26. Name of each previously reported organization that is no longer affiliated with the registrant or client

1 2 3

FOREIGN ENTITIES

27. Add the following foreign entities

Name	Street Address City	Address State/Province Country	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	Owns percent client
			City State Country		

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

1 3 5
2 4 6

Add a page for more up

Printed Name and Title

Susan Emmer, Emmer Consulting
President

LD-2DS (RM)

