

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
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6/10/0

LOBBYING REPORT

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

1. Registrant Name Nancy T. Bernstine			
2. Address <input type="checkbox"/> Check if different than previously reported 1313 Geranium St. NW, Washington, DC 20012			
3. Principal Place of Business (if different from line 2) City: _____ State/Zip (or Country) _____			
4. Contact Name	Telephone	E-mail (optional)	5. Senate I
Nancy T. Bernstine	(202) 722-4196	nbernstine@aol.com	
7. Client Name <input type="checkbox"/> Self	National AIDS Housing Coalition		6. House II

TYPE OF REPORT 8. Year 2001 Midyear (January 1-June 30) OR Year End (July 1
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 Lob**INCOME OR EXPENSES - Complete Either Line 12 OR Line 13**

<p align="center">12. Lobbying Firms</p> <p>INCOME 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"/> ⇒ \$ _____ 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 align="center">13. Organizations</p> <p>EXPENSES relating to lobbying activities for the period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (in</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description.</p> <p><input checked="" type="checkbox"/> Method A. Reporting amounts using LDA</p> <p><input type="checkbox"/> Method B. Reporting amounts under section _____ Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section _____ Internal Revenue Code</p>
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Signature Nancy J. Bernstine

Printed Name and Title Nancy T. Bernstine, consultant

Registrant Name Nancy T. Bernstine Client Name National AIDS Housing Co.

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 additional page(s) as needed.

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

16. Specific lobbying issues

Housing Opportunities for Persons with AIDS

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

House
Senate
U.S. Department of Housing and Urban Development

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

Name	Covered Official Position (if applicable)
<u>Nancy T. Bernstine</u>	

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

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Printed Name and Title Nancy T. Bernstine, consultant

Date 5/22/02