



Signature  \_\_\_\_\_

Printed Name and Title Blattner, Jeffrey H. (Partner) \_\_\_\_\_

LD-2 (REV. 6/98)

P:

Registrant Name Hogan & Hartson L.L.P. Client Name American Hospital Association

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which the registrant is 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 GOV (one per page)

16. Specific lobbying issues

Issues relating to graduate medical education

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

Senate  
House of Representatives

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

NOTE: To add the name of a lobbyist no longer employed by the firm, type the name into the drop down box above.  
Name Covered Official Position (if applicable)

Blattner, Jeffrey H.  
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Hayes, Katherine J.  
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19. Interest of each foreign entity in the specific issues listed on line 16 above  Check if None



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Signature \_\_\_\_\_ Date \_\_\_\_\_

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Registrant Name Hogan & Hartson L.L.P. Client Name American Hospital Association

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

Issues relating to graduate medical education

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

House of Representatives  
Senate

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

NOTE: To add the name of a lobbyist no longer employed by the firm, type the name into the drop down box above.  
Name Covered Official Position (if applicable)

|                               |       |
|-------------------------------|-------|
| Blattner, Jeffrey H.<br>..... | ..... |
| Hayes, Katherine J.<br>.....  | ..... |
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19. Interest of each foreign entity in the specific issues listed on line 16 above  Check if None



Signature \_\_\_\_\_ Date \_\_\_\_\_

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Registrant Name Hogan & Hartson L.L.P. Client Name American Hospital Association

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which the registrant is 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 LBR (one per page)

16. Specific lobbying issues

Issues relating to graduate medical education

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

House of Representatives  
Senate

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

NOTE: To add the name of a lobbyist no longer employed by the firm, type the name into the drop down box above.  
Name Covered Official Position (if applicable)

|                               |       |
|-------------------------------|-------|
| Blattner, Jeffrey H.<br>..... | ..... |
| Hayes, Katherine J.<br>.....  | ..... |
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19. Interest of each foreign entity in the specific issues listed on line 16 above  Check if None

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00000240487

Registrant Name Hogan & Hartson L.L.P. Client Name American Hospital Association

**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: \_\_\_\_\_

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 pertain

**AFFILIATED ORGANIZATIONS**

25. Add the following affiliated organization(s)

| Name | Address | Principal Place of Business (city and state or country) |        |      |
|------|---------|---|--------|------|
|      |         | City:   | State: | Zip: |
|      |         | 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 | City: | Country: |
|------|---------|---|--|-------|----------|
|      |         |   |  |       |          |

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



Signature \_\_\_\_\_ Date 7/28/03

Printed Name and Title Blattner, Jeffrey H. (Partner)