

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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## LOBBYING REPORT

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

1. Registrant Name <b>The Wexler Group</b>			
2. Address <input type="checkbox"/> Check if different than previously reported <b>1317 F Street, NW, Suite 600, Washington, DC 20004</b>			
3. Principal Place of Business (if different from line 2)  City: _____ State/Zip (or Country) _____			
4. Contact Name <b>Cynthia Berry, Principal and General Counsel</b>		Telephone <b>(202) 662-3714</b>	5. Senate ID # <b>41113-36</b>
7. Client Name <input type="checkbox"/> Self <b>American Dental Association</b>		6. House ID # <b>30756001</b>	

### TYPE OF REPORT

8. Year 2001 Midyear (January 1-June 30)  OR Year End (July 1-Decen

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

12. Lobbying Firms	13. Organizations
<b>INCOME</b> relating to lobbying activities for this reporting period was:	<b>EXPENSES</b> 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 reporting method. See instruction for description of
	<input type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definition
	<input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 603 Internal Revenue Code
	<input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162 Internal Revenue Code.

Signature \_\_\_\_\_

Printed Name and Title Cynthia Berry, Principal and General Counsel



Registrant Name The Wexler Group Client Name American Dental 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, provide information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

Role of dental health in DHHS programs  
Impact of insurance reform on dental plans

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

Department of Health and Human Services  
U.S. Senate

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

Name	Covered Official Position (if applicable)	New
Jody Hoffman		<input type="checkbox"/>
Anne Wexler		<input type="checkbox"/>
Cynthia Berry		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

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

Signature Cynthia E Berry Date 8/9/01

Printed Name and Title Cynthia Berry, Principal and General Counsel

