


Signature 

Printed Name and Title Loeb, Laura E. (Partner)

00000250901

Registrant Name Hogan & Hartson L.L.P. Client Name American College of Osteopathic Surgeons

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, provide the information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

Managed Care Reform, physician conditions of participation in Medicare

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

Center for Medicare and Medicaid Services

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)

Halpern, Elizabeth

Loeb, Laura E.

Roberts, Beth L.

Watson, Ruth

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

[Empty box for foreign entity interest]

Signature *R E Hogan*

Date 07/30/2003

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Registrant Name Hogan & Hartson L.L.P. Client Name American College of Osteopathic Surgeons

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:	Zip:
		State:	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	O p t i o n a l

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

Signature *LE Loeb* Date 07/30/2005

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