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LOBBYING REPORT

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

1. Registrant Name Ovarian Cancer National Alliance			
2. Address <input type="checkbox"/> Check if different than previously reported 910 - 17th Street, NW, Suite 413, Washington, DC 20006			
3. Principal Place of Business (if different from line 2) City: _____ State/Zip (or Country) _____			
4. Contact Name Ann Kolker	Telephone (202) 331-1332	E-mail (optional)	5. Senate ID # 50810-12
7. Client Name <input checked="" type="checkbox"/> Self	6. House ID # 34622000		

TYPE OF REPORT 8. Year 2000 Midyear (January 1-June 30) ☐ OR Year End (July 1-December 31) ☒

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 INCOME relating to lobbying activities for this reporting period was: Less than \$10,000 <input type="checkbox"/> \$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Income (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). _____	13. Organizations EXPENSES relating to lobbying activities for this reporting period were: Less than \$10,000 <input checked="" type="checkbox"/> \$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (nearest \$20,000) 14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options. <input type="checkbox"/> Method A. Reporting amounts using LDA definitions only <input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code <input checked="" type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code
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Signature Ann Kolker

Printed Name and Title Ann Kolker, Executive Director

LD-2 (REV. 6/98)

PAGE 1 of _____

Ovarian Cancer National Alliances
Registrant Name _____ Client Name _____

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

Ovarian Cancer Research Program - Dept. of Defense Appropriation
HR 4576

Patients Bill of Rights - HR 2723 and S 1344
HR 2990

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

Name	Covered Official Position (if applicable)	Net
Ann Kolker		<input type="checkbox"/>
Renee Sankus		<input type="checkbox"/>
		<input type="checkbox"/>
		<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 listed on line 16 above ☐ Check if None

Signature Ann Kolker Date 4/26/01
Printed Name and Title Ann Kolker, Executive Director