

BLANK ROME COMISKY & MCCAULEY LLP

Wigman, Cohen, Leitner & Myers Intellectual Property Group

Counselors at Law

Direct Dial:

Fax:

Email:

SECRETARY OF THE SENATE

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H. D.

Delaware
Florida
Maryland
New Jersey
New York
Pennsylvania
Washington, DC

MEMORANDUM

TO: Secretary of the Senate
Clerk of the House of Representatives

FROM: Rebecca South

DATE: April 12, 2000

RE: Lobbying Report

Please excuse the delay in the receipt of the Lobby Registration Report for the period of July 1, 1999 to December 31, 1999 for the attached clients.

We initially sent the reports in February by U.S. Mail, but evidently, they never arrived in your office.

If you have any further questions, please do not hesitate to contact Aileen Holland at 202-530-7498.

The Farragut Building, 900 17th Street, N.W., Suite 1000 • Washington, D.C. 20006 • 202.463.7700 • Fax: 202.463.6915
www.blankrome.com

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H.D.

LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration f. Effective Date of Registration _____
 2. House Identification Number 10588022 Senate Identification Number 6325-12

REGISTRANT

3. Registrant Name BLANK ROME COMISKY & McCAULEY LLP
 Address 1156 15TH St., NW Suite 550
 City Washington State DC Zip 20005 USA
 4. Principal place of business (if different from line 3)
 City Philadelphia State/Zip (or Country) PA
 5. Telephone number and contact name Contact E-Mail (optional)
(202)785-4100 Rebecca F. South South@Blankrome.com
 6. General description of registrant's business or activities
Law Firm

CLIENT *A lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should check the box labeled "Self" and proceed to line 10. Self*

7. Client Name American Insurance Association
 Address 1130 Connecticut Ave. Suite 1000
 City Washington, DC State DC Zip 20038
 8. Principal place of business (if different from line 7)
 City _____ State/Zip (or Country) _____
 9. General description of client's business or activities
Association of Insurance Providers

LOBBYISTS

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any person listed in this section has served as a "covered executive branch official" or "covered legislative branch official" within two years of first acting as a lobbyist for this client, state the executive and/or legislative position(s) in which the person served.

| Name | Covered Official Position (if applicable) |
|--------------------------|---|
| <u>David A. Norcross</u> | |
| | |
| | |

Registrant Name: BLANK ROME COMISKY & McCAULEY LLP
 Client Name: American Insurance Association

LOBBYING ISSUES

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1, page 1.

ENV, INS

12. Specific lobbying issues (current and anticipated)

AFFILIATED ORGANIZATIONS

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the registrant in a semiannual period and in whole or major part plans, supervises, or controls the registrant's lobbying activities?

- No. Go to line 14. Yes. Complete the rest of this section for each entity matching the criteria above, then proceed to line 14.

| Name | Address | Principal Place of Business (city and state or country) |
|------|---------|---|
| | | |

FOREIGN ENTITIES

14. Is there any foreign entity that:

- a) holds at least 20% equitable ownership in the client or any organization identified on line 13; or
- b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances, or subsidizes activities of the client or any organization identified on line 13; or
- c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in the outcome of the lobbying activity?

- No. Sign and date the registration. Yes. Complete the rest of this section for each entity matching the criteria above, then sign and date the registration.

| Name | Address | Principal Place of Business (city and state or country) | Amount of contribution for lobbying activities | Ownership percentage in client |
|------|---------|---|--|--------------------------------|
| | | | | |

Signature: *David A. Norcross* Date: 2/10/2000

Printed Name and Title: David A. Norcross - Administrative Partner, Washington, DC