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LOBBYING REPORT

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

1. Registrant name			
Morrison Public Affairs Group			
2. Address		<input type="checkbox"/> Check if different than previously reported	
6004 Onondaga Road			
Bethesda		MD	20816 US
3. Principal place of business (if different than line 2)			
City		State/Zip or Country	
4a. Contact Name	b. Telephone number	c. E-mail	
Mr. Bruce A. Morrison	301-263-1142	b.a.m@att.net	
7. Client Name			5. Senate ID #
<input type="checkbox"/> Self			67193-15
AMN Healthcare			6. House ID #
			35656006

TYPE OF REPORT 8. Year 2005 Midyear (January 1-June 30) ☐ OR Year End (July 1-December) ☐

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
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating to lobbying activities for this reporting were:
Less than \$10,000 <input checked="" type="checkbox"/>	Less than \$10,000 <input type="checkbox"/>
\$10,000 or more <input type="checkbox"/> ⇒ \$ _____	\$10,000 or more <input type="checkbox"/> ⇒ \$ _____
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. 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), Internal Revenue Code
	<input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code

Edit Form >

Signature

Bruce A. Morrison

Date

2/14/06

Printed Name and Title Bruce A. Morrison, Chairman, Morrison Public Affairs Group



Registrant Name Morrison Public Affairs Group

Client Name AMN Healthcare

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the 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 IMM - Immigration (one per page)

16. Specific lobbying issues

1. Department of Homeland Security regulations.

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

- 1. Senate
- 2. House of Representatives

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

Name	Covered Official Position (if applicable)
Bruce Morrison A.	Federal Housing Finance Board

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

Signature _____

Date _____



Printed Name and Title Bruce A. Morrison, Chairman, Morrison Public Affairs Group

LD-2DS (Rev. 4.06)