

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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SECRETARY OF THE SENATE
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LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration

1. Effective Date of Registration **09/01/2005**

2. House Identification Number

Senate Identification Number

REGISTRANT

3. Registrant name **Patton Boggs LLP**

Address **2550 M Street, NW**

City **Washington**

State **DC**

Zip **20037**

4. Principal place of business (if different from line 3)

City

State/Zip (or Country)

5. Telephone number and contact name

James B. Christian

Contact **202-457-6484** E-mail (optional)

6. General description of registrant's business or activities

Law firm

CLIENT

7. Client name **Ad Hoc Workers' Comp TRIA Coalition**

Address **2550 M Street, NW**

City **Washington**

State **DC**

Zip **20037**

8. Principal place of business (if different from line 7)

City

State/Zip (or Country)

9. General description of client's business or activities

State funds engaged in the workers compensation insurance business.

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 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 the client, *state the executive and/or legislative position(s) in which they served.*

Name	Covered Official Position (if applicable)
James Christian	
Greg Laughlin	
Michael Power	

Form LD-1 (Rev 06/98)

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Registrant Name Patton Boggs LLP

Client Name Ad Hoc Workers' Comp TRIA Coalition

LOBBYING ISSUES

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

12. Specific lobbying issues (current and anticipated)
Terrorism Risk Insurance Act renewal

AFFILIATED ORGANIZATIONS

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

No ⇨ Go to line 14.

Yes

Complete the rest of this section for entity matching the criteria above, t proceed to line 14.

Name	Address	Principal Place of Business (city and state or country)
COALITION MEMBERS:		
Pinnacol Assurance	7501 East Lowery Boulevard	Denver, CO 80230
Missouri Emmployers Mutual Insurance Company	10000 West Nifong	Colombia, MO 65203
State Compensation Insurance Fund	1275 Market Street	San Francisco, CA 94103

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 ea entity matching the criteria above, the and date the registration.

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	Own percent cli

Signature

Date: 10/14/2005

Printed Name and Title **James B. Christian, Partner**

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13. Affiliated Organizations:

COALITION MEMBERS

Texas Mutual Insurance Company
6210 East Highway 290
Austin, Texas 78723-1098

Workers' Compensation Fund
392 East 6400 South
P.O. Box 57929
Salt Lake City, Utah 84157-0929

Montana State Fund
5 South Last Chance Gulch
P.O. Box 4759
Helena, Montana 59601-4759

State Fund Mutual Companies
3500 American Boulevard West, Suite 700
Bloomington, Minnesota 55431-4434

Louisiana Workers' Compensation Corporation
2237 South Acadian Thruway
Baton Rouge, Louisiana 70808

Beacon Mutual Insurance Company
One Beacon Centre
Warwick, Rhode Island 02886-1378

Injured Workers' Insurance Fund
8722 Loch Raven Boulevard
Towson, Maryland 21286-2235

State Compensation Fund of Arizona
3030 North Third Street
Phoenix, Arizona 85012

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