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SECRETARY OF THE SENATE
04 MAR 19 PM 2:51

LOBBYING REPORT

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

1. Registrant Name Schwartz & Ballen LLP			
2. Address <input type="checkbox"/> Check if different than previously reported 1990 M Street, NW, Suite 500			
3. Principal Place of Business (if different from line 2) City: Washington State/Zip (or Country) DC 20036			
4. Contact Name	Telephone	E-mail (optional)	5. Senate ID #
Gilbert T. Schwartz	202/776-0700		34650-12
7. Client Name <input type="checkbox"/> Self American Council of Life Insurers			6. House ID # 33541001

TYPE OF REPORT 8. Year 2003 Midyear (January 1-June 30) OR Year End (July 1-Dec

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

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p align="center">12. Lobbying Firms</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Income (nearest \$20,000)</p> <p>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).</p>	<p align="center">13. Organizations</p> <p>EXPENSES relating to lobbying activities for this reporting period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (nearest \$</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description of</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definit</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 603: Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162 Internal Revenue Code</p>
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Signature _____

Printed Name and Title _____

LD-2 (REV. 6/98)

P.

Registrant Name Schwartz & Ballen LLP Client Name American Council of Life Insurers

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

16. Specific lobbying issues

H.R. 2622 Fair and Accurate Credit Transactions Act of 2003


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

U. S. House of Representatives

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

Name	Covered Official Position (if applicable)
Gilbert T. Schwartz	

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

Signature  Date 2/4/04

Printed Name and Title Gilbert T. Schwartz, Partner

Form LD-2 (Rev.6/98)

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