

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

SECRETARY OF THE SENATE
01 AUG 14 AM

LOBBYING REPORT

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

1. Registrant Name <u>Alliance of American Insurers</u>			
2. Address <input type="checkbox"/> Check if different than previously reported <u>1211 Conn Ave NW, Suite 400, Washington D.C. 20036</u>			
3. Principal Place of Business (if different from line 2) City: _____ State/Zip (or Country) _____			
4. Contact Name <u>David M. Farmer, Senior Vice President, Fed. Affairs</u>		Telephone	5. Senate ID # <u>1012-1</u>
7. Client Name <input type="checkbox"/> Self		E-mail (optional)	6. House ID # <u>1012-1</u>

TYPE OF REPORT 8. Year 2001 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 Act

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 type="checkbox"/> \$10,000 or more <input checked="" type="checkbox"/> ⇒ \$ <u>100,000</u> Expenses (nearest \$20,000) 14. REPORTING METHOD. Check box to indicate appropriate accounting method. See instructions for description of options. <input type="checkbox"/> Method A. Reporting amounts using LDA definitions <input type="checkbox"/> Method B. Reporting amounts under section 6033(b) of Internal Revenue Code <input type="checkbox"/> Method C. Reporting amounts under section 162(e) of Internal Revenue Code
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Signature David M. Farmer

Printed Name and Title David M. Farmer, Senior Vice President, Federal Affairs
Filing #c3bd296f-a9e8-4068-98ac-96aac51e427a - Page 1 of 18



Registrant Name Alliance of American Insurers 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, information as requested. Attach additional page(s) as needed.

15. General issue area code AUT (one per page)

16. Specific lobbying issues

Variety of Highway safety related issues; implementation of child seats, funding issues; competitive auto parts

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

House, Senate, NHTSA

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

Name	Covered Official Position (if applicable)
Kenneth D. Schloman	

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

Signature _____ Date _____

Printed Name and Title



Registrant Name Alliance of American Insurers Client Name _____

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

16. Specific lobbying issues

S 350, HR 2064---liability provisions related to Superfund pr

17. House(s) of Congress and Federal agencies contacted

Check if None

House and Senate, EPA

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

Name	Covered Official Position (if applicable)
Kenneth D. Schloman	
David M. Farmer	

19. Interest of each foreign entity in the specific issues listed on line 16 above

Check if None

Signature _____ Date _____

Printed Name and Title



Registrant Name Alliance of American Client Name _____
Insurers

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

16. Specific lobbying issues

General issues related to OSHA reform; ergonomics related rulemaking--- resolution of disapproval under the Congressional Act

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

House of Rep., Senate, OSHA

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

Name	Covered Official Position (if applicable)
Kenneth D. Schloman	
Keith D. Lessner	
David M. Farmer	
Deborah Sherno	

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

Signature _____ Date _____

Printed Name and Title



Registrant Name Alliance of American Insurers 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 HOU (one per page)

16. Specific lobbying issues

HUD utilization of funding to engage in insurance related stu

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

House of Rep. and Senate

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

Name	Covered Official Position (if applicable)
Nelson Garcia	

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

Signature _____ Date _____

Printed Name and Title



Registrant Name Alliance of American Insurers Client Name _____

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

16. Specific lobbying issues

Department of Transportation funding of Highway safety program
Transportation Appropriations, HR2299 and Senate companion; NHTSA
related truck safety issues

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

House, Senate, NHTSA, DOT

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

Name	Covered Official Position (if applicable)
Kenneth D. Schioman	
David M. Farmer	

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

Signature _____ Date _____

Printed Name and Title



Registrant Name Alliance of American Insurers 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 INS (one per page)

16. Specific lobbying issues

General Health care related issues as applied to the P&C insurance industry; General issues related to taxation of the property and casualty industry; General issues relating to the confidentiality of medical records; HR 1428 & HR 1551 relating to flood insurance mitigation; mitigation issues related to natural disasters; HR 526, S 1052 and subsequent bills related to managed care re "patients Bill of Rights"

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

House of Rep., Senate, FEMA, HCFAA, HHS

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

Name	Covered Official Position (if applicable)
David M. Farmer	
Kenneth D. Schloman	
Nelson Garcia	
Deborah Sherno	
Lamar Whitman	

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

Signature _____ Date _____

Printed Name and Title



Registrant Name Alliance of American Insurers Client Name _____

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

16. Specific lobbying issues

Implimentation of Gramm, Leach, Bliley Financial services Mod HR 1408 dealing with fraud in the financial services industry

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

House of Rep., Senate, and FTC

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

Name	Covered Official Position (if applicable)
Kenneth D. Schloman	
David M. Farmer	
Nelson Garcia	
Larry Kibbee	
Rita Nowak	

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

Signature _____ Date _____

Printed Name and Title



Registrant Name Alliance of American Insurers Client Name _____

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

16. Specific lobbying issues

Class Action Jurisdiction Reform--- Effort to have prior Cong reintroduced

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

House of Rep. and Senate.

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

Name	Covered Official Position (if applicable)
Kenneth D. Schloman	
David M. Farmer	

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

Signature David M. Farmer Date 8/13/01

