Clerk of the House of Representatives Legislative Resource Center B-106 Cannon Building Washington, D.C. 20515

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Secretary of the Senate Office of Public Records 232 Hart Building Washington, D.C. 20510

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## **LOBBYING REPORT**

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

| 1.    | Registrant Name   |  |  |  |  |  |  |  |
|-------|---|--|--|--|--|--|--|--|
|       | Hogan & Hartson L.L.P.  |  |  |  |  |  |  |  |
|       | Address   |  |  |  |  |  |  |  |
|       | Principal Place of Business (if different from line 2) City State/  | Zip (or Country)   |  |  |  |  |  |  |
|       | Contact Name Telephone Warnke, Christine M. 202-637-5645 CM   | E-mail (optional) Warnke@HHLAW.com  5. Senate ID # 18422-2878                                      |  |  |  |  |  |  |
|       | Client name  Self Chlorine Chemistry Council  | 6. House ID #<br>30470-178   |  |  |  |  |  |  |
| TY    | TYPE OF REPORT 8. Year 2002 Midyear (January 1-June 30) ☑ OR Year End (July 1-Dec   |  |  |  |  |  |  |  |
| 9.    | 9. Check if this filing amends a previously filed version of this report  |  |  |  |  |  |  |  |
| 10.   | 10. Check if this is a Termination Report □ ⇒ Termination Date 11. No Lobbyin   |  |  |  |  |  |  |  |
| INC   | COME OR EXPENSES — Complete Either Line 12. Lobbying Firms  | 12 OR Line 13  13. Organizations   |  |  |  |  |  |  |
|       | OME relating to lobbying activities for this reporting period was:  | <b>EXPENSES</b> relating to lobbying activities for this repowere:                                 |  |  |  |  |  |  |
|       | than \$10,000 ☑   | Less than \$10,000   |  |  |  |  |  |  |
| \$10, | 000 or more   | \$10,000 or more   |  |  |  |  |  |  |
| lobb  | ride a good faith estimate, rounded to the nearest \$20,000, of all ying related income from the client (including all payments to the strant by any other entity for lobbying activities on behalf of the at). | 14. <b>REPORTING METHOD.</b> Check box to accounting method. See instructions for description of a |  |  |  |  |  |  |
|       | 7   | ☐ Method A. Reporting amounts using LDA definiti   |  |  |  |  |  |  |
|       |   | Method B. Reporting amounts under section 6 Internal Revenue Code                                  |  |  |  |  |  |  |
|       |   | ☐ Method C. Reporting amounts under section 162( Revenue Code                                      |  |  |  |  |  |  |
| Sign  | nature Chet Wayn  | Date 1-12-2002   |  |  |  |  |  |  |
| Prin  | tted Name and Title Warnke, Christine M. Governmental A   | ffairs Advisor   |  |  |  |  |  |  |

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| Registrant Name Hogan & Hartson L.L.P.   | <del></del>   | Client Name       | Chlorine Chemistry Council             |
|--|---|-------------------|--|
| <b>LOBBYING ACTIVITY.</b> Select as many of engaged in lobbying on behalf of the client dinformation as requested. Attach individual p   | luring the repor  | ting period. Us   |  |
| 15. General issue area code <u>CHM</u> (   | (one per page)  |                   |  |
| 16. Specific lobbying issues<br>FY 2003 Senate Labor, HHS Appropriations I<br>FY 2003 House Labor, HHS Appropriations I  |   |                   |  |
| 17. House(s) of Congress and Federal agencie<br>U.S. Senate;<br>U.S. House of Representatives  | es contacted  | □ Check if        | None                                   |
| 18. Name of each individual who acted as a lo  | obbyist in this is  |                   | oial Dogition (if annliaghla)          |
| Name   | Covered Official Position (if applicable)  Governmental Affairs Advisor |                   |  |
| Warnke, Christine M.   | Gove  | illinentai Attair | s Advisor                              |
|  |   |                   | - Alfa halangarara sa r                |
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|  | . naraahanna  | ·-···             |  |
| 19. Interest of each foreign entity in the speci   | fic issues listed   | on line 16 abov   | re ☑ Check if None                     |
| Signature Warnke, Christine M.   |   |                   |  |

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| Registrant Name                       | Hogan & Hartson L.L.P.  |                            | Client Name                             | Chlorine Chemistry Council         |
|---------------------------------------|-------------------------|----------------------------|---|------------------------------------|
| Information Upd                       | ate Page –              | – Complete ONLY whe        | ere registration inform                 | ation has changed.                 |
| 20. Client new add                    | iress                   |                            |   |                                    |
| 21. Client new pri                    | ncipal plac             | e of business (if differen | t from line 20)                         |                                    |
| City                                  |                         |                            | State/Zip (or                           | Country)                           |
| 22. New general d                     | escription              | of client's business or ac | tivities                                |                                    |
| LOBBYIST UPD 23. Name of each         |                         | reported individual who    | is <b>no longer</b> expected            | to act as a lobbyist for the clien |
| <b>ISSUE UPDATE</b> 24. General lobby | ing issues <sub>l</sub> | previously reported that I | no longer apply                         |                                    |
| AFFILIATED Ol 25. Add the follow      |                         |                            |   |                                    |
| Name                                  |                         | Address                    | Principal Place of (city and state or   |                                    |
| 26. Name of each                      | previously              | reported organization th   | at is <b>no longer</b> affiliate        | d with the registrant or client    |
| FOREIGN ENTI  27. Add the follow      |                         | n entities                 |   |                                    |
| Name                                  |                         | Address                    | Principal place of bus and state or cou |                                    |
|                                       |                         |                            |   |                                    |
| 28. Name of each client or affilia    |                         |                            | hat <b>no longer</b> owns, <b>or</b>    | controls, or is affiliated with th |
| Signature                             | Rek                     | Warh                       |   |                                    |
| Printed Name and                      | Title <u>W</u> ar       | nke, Christine M. Governn  | nental Affairs Advisor                  |                                    |

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