

August 10, 2000

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Secretary of the Senate
Office of Public Records
232 Hart Senate Office Building
Washington, DC 20510

Re: Form LD-2; Fortis Insurance Company, Senate ID #38131-12

Dear Sir or Madam:

Enclosed please find an original Form LD-2 for the period January 1, 2000 to June 30, 2000 as required to be filed under the Lobbying Disclosure Act of 1995.

Please feel free to contact me at 414.299.6771 if you have any questions.

Yours sincerely,



Molly A. Johnson
Paralegal

Encl.

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Fortis Health

501 West Michigan
P.O. Box 3050
Milwaukee, WI
53201-3050
Telephone
1 800 800 1212

Fortis Insurance Company / Fortis Benefits Insurance Company / John Aiken Life Insurance Company

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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LOBBYING REPORT

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

1. Registrant Name Fortis Insurance Company			
2. Address <input type="checkbox"/> Check if different than previously reported 501 West Michigan			
3. Principal Place of Business (if different from line 2) City: Milwaukee State/Zip (or Country) Wisconsin 53203			
4. Contact Name William F. Sterling	Telephone 414/299-6824	E-mail (optional)	5. Senate ID # 38131-12
7. Client Name <input checked="" type="checkbox"/> Self			6. House ID # 33604000

TYPE OF REPORT 8. Year 2000 Midyear (January 1-June 30) OR Year End (July 1-December 31)

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

<p>12. Lobbying Firms</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ <small>Income (nearest \$20,000)</small></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>13. Organizations</p> <p>EXPENSES relating to lobbying activities for this reporting period were:</p> <p>Less than \$10,000 <input checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ <small>Expenses (nearest \$20,000)</small></p> <p>14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options.</p> <p><input checked="" type="checkbox"/> Method A. Reporting amounts using LDA definitions only</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code</p>
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Signature *Daniel K. Hill*
 Printed Name and Title Daniel K. Hill, Vice President

Registrant Name Portis Insurance Company Client Name Self

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
Antitrust waivers
Medical savings accounts
Tax equity for individuals

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

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

Name	Covered Official Position (if applicable)	New
Kerry Smith	Government Relations Director	<input type="checkbox"/>
Christine Nierzwicki	Government Relations Director	<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

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

Signature David K. Hill Date 8/9/00
Printed Name and Title David K. Hill, Vice President

Registrant Name Fortis Insurance Company Client Name Self

Information Update Page - Complete ONLY where registration information has changed.

20. Client new address

21. Client new principal place of business (if different from line 20)

City

State/Zip (or Country)

22. New general description of client's business or activities

LOBBYIST UPDATE

23. Name of each previously reported individual who is no longer expected to act as a lobbyist for the client

ISSUE UPDATE

24. General lobbying issues previously reported that no longer pertain

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal Place of Business (city and state or country)

26. Name of each previously reported organization that is no longer affiliated with the registrant or client

FOREIGN ENTITIES

27. Add the following foreign entities

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	Ownership percentage in client

28. Name of each previously reported foreign entity that no longer owns, or controls, or is affiliated with the registrant, client or affiliated organization.

Signature David K Hill Date 8/9/00
Printed Name and Title David K. Hill, Vice President

Form 1 D-2 (Rev. 6/99)

Page 3 of 3