

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

RECEIVED  
 SECRETARY OF THE SENATE  
 PUBLIC RECORDS

00 AUG 15 AM 10:06

# LOBBYING REPORT

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

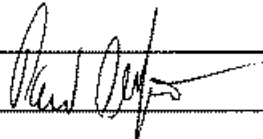
1. Registrant Name <u>International Assoc. of Psychosocial Rehabilitation Services (IAPSRs)</u>			
2. Address <input type="checkbox"/> Check if different than previously reported <u>10029 Governor Warfield Parkway, Suite 301</u>			
3. Principal Place of Business (if different from line 2) City: <u>Columbia</u> State/Zip (or Country) <u>MD 21044</u>			
4. Contact Name <u>Paul J. Seifert</u>	Telephone <u>410-730-7190</u>	E-mail (optional) <u>paulseifert@iaprs.org</u>	5. Senate ID # <u>19786-12</u>
7. Client Name <input checked="" type="checkbox"/> Self	6. House ID # <u>3022900</u>		

**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><b>12. Lobbying Firms</b></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><b>13. Organizations</b></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 checked="" type="checkbox"/> ⇒ \$ <u>60,000</u>  <small>Expenses (nearest \$20,000)</small></p> <p><b>14. REPORTING METHOD.</b> Check box to indicate expense accounting method. See instructions for description of options.</p> <p><input 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>
--	--

Signature   
 Printed Name and Title Paul J. Seifert, Director of Government Affairs

Registrant Name IAFSES 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 HCR (one per page)

16. Specific lobbying issues

S. 2639--Mental Health Early Intervention, Treatment & Prevention Act

S. 976--Substance Abuse/Mental Health Servcs Admin. Reauth.

HR 4585--Medical Privacy

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

Check if None

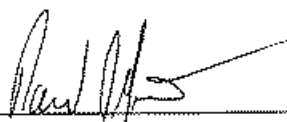
House, Senate, SAMHSA (HHS)

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

Name	Covered Official Position (if applicable)	No.
<u>Paul J. Seifert</u>	<u>Dir. of Gov't Affairs</u>	<input type="checkbox"/>
		<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  Date 8/14/00

Printed Name and Title Paul J. Seifert, Dir. of Gov't Affairs

Registrant Name IAPSRs 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 LBR (one per page)

16. Specific lobbying issues

Fair Labor Standards Act Sec. 14c

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

House, Senate, Rehabilitation Services Admin (Dept. of ED) & DOL

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

Name	Covered Official Position (if applicable)	No.
<u>Paul J. Seifert</u>	<u>Dir. of Gov't Affairs</u>	<input type="checkbox"/>
		<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  Date 5/14/00

Printed Name and Title Paul J. Seifert, Dir. of Gov't Affairs

Registrant Name IAPSR 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 MMM (one per page)

16. Specific lobbying issues

Medicaid IMD Exclusion

Medicare Partial Hospitalization Program

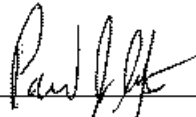
17. House(s) of Congress and Federal agencies contacted  Check if None

House, Senate

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

Name	Covered Official Position (if applicable)	No.
<u>Paul J. Seifert</u>	<u>Dir. of Gov't Affairs</u>	<input type="checkbox"/>
		<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  Date 8/14/00  
Printed Name and Title Paul J. Seifert, Dir. of Gov't Affairs

Registrant Name IAPSES 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 WEL (one per page)

16. Specific lobbying issues

H.R. 5--Senior Citizens Right to Work Act  
Social Security Disability Earnings Test  
Soc. Sec. Representative Payee Fraud  
Soc. Sec. Attorney Fees.

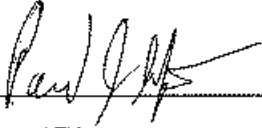
17. House(s) of Congress and Federal agencies contacted  Check if None

House, Senate

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

Name	Covered Official Position (if applicable)	No.
<u>Paul J. Seifert</u>	<u>Dir. Of Gov't Affairs</u>	<input type="checkbox"/>
		<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  Date 8/14/00  
Printed Name and Title Paul J. Seifert, Dir. of Gov't Affairs