

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

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

SECRETARY OF THE SENATE
52 AUG 10 PM 3:04
H.D.

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.			
2. Address <input checked="" type="checkbox"/> Check if different than previously reported Columbia Square, 555 Thirteenth Street, N.W. Washington, D.C. 20004-1109			
3. Principal Place of Business (if different from line 2) City		State/Zip (or Country)	
4. Contact Name Darrel J. Grinstead	Telephone 202/6375989	E-mail (optional) DJGrinstead@HHLAW.com	5. Senate ID # 18422-1662
7. Client name <input type="checkbox"/> Self American Ambulance Association			6. House ID # 30470160

TYPE OF REPORT 8. Year 1999 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	
12. Lobbying Firms	13. Organizations
INCOME relating to lobbying activities for this reporting period was:	
Less than \$10,000 <input checked="" type="checkbox"/>	EXPENSES relating to lobbying activities for this reporting period were:
\$10,000 or more <input type="checkbox"/> ⇨ \$ _____ Income (nearest \$20,000)	Less than \$10,000 <input type="checkbox"/>
	\$10,000 or more <input type="checkbox"/> ⇨ \$ _____ Expenses (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).	
14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options.	
<input type="checkbox"/> Method A. Reporting amounts using LDA definitions only	
<input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code	
<input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code	

Signature Darrel J. Grinstead
Printed Name and Title Darrel J. Grinstead, Partner

Date August 10, 1999

Registrant Name Hogan & Hartson L.L.P. 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 individual page(s) as needed.

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

16. Specific lobbying issues

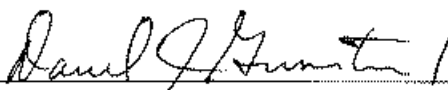
To include a "prudent layperson" standard for coverage of ambulance services in the Patient's Bill of Rights legislation.

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

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

Name	Covered Official Position (if applicable)	New
Darrel J. Grinstead		<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
none

Signature 

Printed Name and Title Darrel J. Grinstead, Partner

Registrant Name Hogan & Hartson L.L.P.

Client Name _____

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** apply _____

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 J. Grinstead

Printed Name and Title David J. Grinstead, Partner