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LOBBYING REPORT

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

1. Registrant Name
American Humane Association

2. Address Check if different than previously reported
236 Massachusetts Ave NE #203

3. Principal Place of Business (if different from line 2)
Washington State/Zip (or Country) DC 20002

4. Contact Name <u>Amy Ridings</u>	Telephone <u>202.543.7780</u>	E-mail (optional) <u>amy@americanhumane.org</u>	5. Senate ID #
7. Client Name <input type="checkbox"/> Self			6. House ID #

TYPE OF REPORT & Year 2001 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 Act

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"/> ⇔ \$ _____ Income (nearest \$20,000)</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"/> ⇔ \$ _____ Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate exact accounting method. See instructions for description of option</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definitions of</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(3) Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) of Internal Revenue Code</p>
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Signature: [Handwritten Signature]

Printed Name and Title: Amy P. Ridings, Legislative Director

http://sopr.senate.gov/cgi-win/opr_gifviewer.exe?

Registrant Name American Humane Assoc 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 ANTI (one per page)
FARM

16. Specific lobbying issues

Hcon Res 241	HR 700	S 911
HR 2330/S 1191	HR 645	S 668
HR 1989	HR 643	S 1731/HR 2646
HR 1796	S 1655	S 345/HR 1155
HR 1367	S 1478/HR 3058	HR 1421
HR 1187	S 1125/HR 397	Hcon Res 175/Scon Res 45

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

US Senate	Customs
US House	
UCDA	
HHS	

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

Name	Covered Official Position (if applicable)
<u>Amy Ridings</u>	<u>Legislative Director</u>
<u>Jennifer Beck</u>	<u>Leg. Assistant</u>
<u>Caroline DeRose</u>	<u>Leg. Assistant</u>
<u>Ann Sparks</u>	<u>Director of Public Policy</u>
_____	_____
_____	_____
_____	_____

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

Signature [Signature] Date Feb. 8, 2002
Printed Name and Title Amy E. Ridings, Legislative Director

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Registrant Name American Neovane Inc 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

Adele Douglass

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	Owner percent 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  Date Feb 8, 2002
 Printed Name and Title Amy E. Rodriguez, Legislative Director
 Form LD-2 (Rev. 6/98) Page _____ of _____

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