

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

SECRETARY OF THE

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LOBBYING REPORT

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

1. Registrant Name KAR Associates, Inc.			
2. Address <input type="checkbox"/> Check if different than previously reported 6534 Marlo Drive			
3. Principal Place of Business (if different from line 2) Falls Church VA 22042 City: State/zip (or Country)			
4. Contact Name Kathleen A. Ream	Telephone (703) 241-1064	E-mail (optional) kathream@aol.com	5. Senate ID # 45015
7. Client Name <input type="checkbox"/> Self American Academy of Emergency Medicine			6. House ID # 34537

TYPE OF REPORT 8. Year 2003 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

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"/> \$10,000 or more <input type="checkbox"/> ⇨ \$ _____ <small>Income (nearest \$20,000)</small>	EXPENSES relating to lobbying activities for this reporting period were: Less than \$10,000 <input type="checkbox"/> \$10,000 or more <input type="checkbox"/> ⇨ \$ _____ <small>Expenses (nearest \$20,000)</small>
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 exp accounting method. See instructions for description of opt <input type="checkbox"/> Method A. Reporting amounts using LDA definition <input type="checkbox"/> Method B. Reporting amounts under section 6033(f) Internal Revenue Code <input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code

Signature *Kathleen A. Ream* Date 2/10/07

Printed Name and Title Kathleen A. Ream, President

Registrant Name KAR Associates, Inc. Client Name American Academy of Emergency Medicine

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,** information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

Medical Liability/Tort Reform

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

House of Representative
U.S. Senate

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

Name	Covered Official Position (if applicable)
Kathleen A. Ream	

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

Signature *Kathleen A. Ream* Date 2/13/2004

Registrant Name KAR Associates, Inc. Client Name American Academy of Emergency Medicine

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the registrant is engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code, provide the information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

Medicare Reform Physician Reimbursement
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17. House(s) of Congress and Federal agencies contacted Check if None

House of Representative U.S. Senate
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18. Name of each individual who acted as a lobbyist in this issue area

Name	Covered Official Position (if applicable)
Kathleen A. Ream	

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

Signature *Kathleen A. Ream* Date 2/13/2004

Printed Name and Title Kathleen A. Ream, President

Form LD-2 (Rec. 4/03)

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