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



02 AUG 2

LOBBYING REPORT

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

Nusgart Consulting, LLC			
2. Address		D 20814	
3. Principal Place of Business (if differen	t from line 2)		
City:	State		
Contact Name Marcia Nusgart	Telephone 301-530-7846	E-mail (optional)	5. Senate ID # 48111-226
7. Client Name Self Coloplast Corp.			6. House ID # 34467023
0. Check if this is a Termination	Report 🔲 🗢 Termination		11. No Lobbying A
0. Check if this is a Termination I	Report □ ⇒ Termination SES - Complete Either	r Line 12 OR Line 13	11. No Lobbying A
O. Check if this is a Termination INCOME OR EXPENS 12. Lobbying INCOME relating to lobbying act	Report		nizations
O. Check if this is a Termination INCOME OR EXPENS 12. Lobbying INCOME relating to lobbying act period was:	Report	r Line 12 OR Line 13 13. Organ EXPENSES relating to lobbying	nizations
O. Check if this is a Termination INCOME OR EXPENS 12. Lobbying INCOME relating to lobbying act period was: Less than \$10,000	Report	T Line 12 OR Line 13 13. Organ EXPENSES relating to lobbying a period were:	nizations
O. Check if this is a Termination INCOME OR EXPENS 12. Lobbying INCOME relating to lobbying act period was: Less than \$10,000	Report	T Line 12 OR Line 13 13. Organ EXPENSES relating to lobbying a period were: Less than \$10,000 \$10,000 or more \$\square \\$	nizations activities for this report
O. Check if this is a Termination INCOME OR EXPENS 12. Lobbying INCOME relating to lobbying act period was: Less than \$10,000 \$10,000 or more \$\simeq\$ \$\square\$ Provide a good faith estimate, round	Report	T Line 12 OR Line 13 13. Organ EXPENSES relating to lobbying a period were: Less than \$10,000 \$10,000 or more \$\square\$ \$\square\$	nizations activities for this report Expenses (nearest \$20,000) Theck box to indicate ex
O. Check if this is a Termination INCOME OR EXPENS 12. Lobbying INCOME relating to lobbying act period was: Less than \$10,000 \$10,000 or more	Report	T Line 12 OR Line 13 13. Organ EXPENSES relating to lobbying a period were: Less than \$10,000 \$10,000 or more \$\sigma\$ \$ \$	nizations activities for this report Expenses (nearest \$20,000) Theck box to indicate ex ns for description of op
O. Check if this is a Termination INCOME OR EXPENS 12. Lobbying INCOME relating to lobbying act period was: Less than \$10,000 \$10,000 or more \$\Begin{array}{c} \infty \inf	Report	T Line 12 OR Line 13 13. Organ EXPENSES relating to lobbying a period were: Less than \$10,000	nizations activities for this report Expenses (nearest \$20,000) Theck box to indicate ex ns for description of op as using LDA definition ts under section 6033(b)
INCOME relating to lobbying act period was: Less than \$10,000	Report	T Line 12 OR Line 13 13. Organ EXPENSES relating to lobbying a period were: Less than \$10,000 \$10,000 or more \$\Begin{array} \$14. REPORTING METHOD. Coaccounting method. See instruction \$\Begin{array} \$Method A. Reporting amount \$\Begin{array} \$Method B. Reporting amount \$\Begin{array} \$Method B. Reporting amount \$\Begin{array} \$Method B. Reporting amount \$\Begin{array} \$Method B. Reporting amount \$\Begin{array} \$Method B. Reporting amount \$\Begin{array} \$Method B. Reporting amount \$\Begin{array} \$Method B. Reporting amount \$\Begin{array} \$Method B. Reporting amount \$\Begin{array} \$Method B. Reporting amount \$\Begin{array} \$Method B. Reporting amount \$\Begin{array} \$Method B. Reporting amount \$\Begin{array} \$Method B. Reporting amount \$\Begin{array} \$Method B. Reporting amount \$\Begin{array} \$Method B. Reporting amount \$\Begin{array} \$Method B. Reporting amoun	Expenses (nearest \$20,000) Theck box to indicate ex ns for description of opers using LDA definitions to under section 6033(b) Code ts under section 162(e)

	-		
Filip # #db12 c0do Ffc2 4cdc 00c	0.07266 516.2.2.5	2 - 4 4	

Registrant Name_	Nusgart Consulting, LLC	Client Name	Coloplast Corp.
	CTIVITY. Select as many cooring on behalf of the client durequested. Attach additional page	INV ING PENAMING NAI	eflect the general issue areas in which the regriod. Using a separate page for each code, p
15. General issu	e area code MMM (one	e per page)	
16. Specific lobb Regulatory a products and	ction affecting Medicare coverag	e and payment for we	ound care
	Congress and Federal agencies		☐ Check if None
Carriers (DMI contacted	subcontractors, the Durable Me ERC) and the Statistical Analysis	dical Equipment Reg S DMERC (SADMER)	ional C)
18. Name of each	individual who acted as a lob	byist in this issue are	ea
	Name		Covered Official Position (if applicable)
Marcia Nusgart			
19. Interest of each f	oreign entity in the specific issues	s listed on line 16 abov	Check if None
Signature	Muru Nuyr Marcia Nusgart, President		Date August 10, 2002
Printed Name and Tit	le		
Form LD-2 (Rev.6/98)			•

Filing #db12c0da-5fc2-4edc-80a0-9726fab516a3 - Page 4 of 4	