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SECRETARY OF THE SENATE
03 AUG 14 PM 4:26

LOBBYING REPORT

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

1. Registrant Name Anderson Pitts, LLC		
2. Address <input type="checkbox"/> Check if different than previously reported 101 Constitution Avenue, N.W., Suite 800		
3. Principal Place of Business (if different from line 2) Washington DC 20001 City: State/zip (or Country)		
4. Contact Name Lori A. Kuhns	Telephone (202) 742-4653	E-mail (optional) 5. Senate ID # 85071-75
7. Client Name <input type="checkbox"/> Self Mutual of Omaha		6. House ID # 36488012

TYPE OF REPORT 8. Year 2003 Midyear (January 1-June 30) OR Year End (July 1-December)

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 Activities

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 checked="" type="checkbox"/> ⇨ \$ <u>10,000.00</u> 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 type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ _____ Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate expert accounting method. See instructions for description of options</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definitions</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b) Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code</p>

Signature _____ Date _____

Printed Name and Title _____ Lori A. Kuhns, Director of Business Operations _____

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Registrant Name Anderson Pitts, LLC Client Name Mutual of Omaha

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

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

16. Specific lobbying issues

Treasury Department study regarding the availability of catastrophic reinsurance for group life insurance under the Federal Terrorism Risk Insurance Act of 2003.

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

House
Senate
Treasury
White House

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

Name	Covered Official Position (if applicable)
Philmore B. Anderson	
William J. Briggs	

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

Signature _____ Date 08/08/03

Printed Name and Title

Lori A. Kuhns, Director of Business Operations

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Registrant Name Anderson Pitts, LLC Client Name Mutual of Omaha

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** 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	Overseas 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 *Lerian Kuba* Date 08/08/03

Printed Name and Title Lori A. Kuhns, Director of Business Operations

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