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LOBBYING REPORT

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

Registrant Name			
Covington & Burling			
2. Address			
1201 Pennsylvania Avenue, N.W.			
3. Principal Place of Business (if different from line 2)			
City: Washington	State/Zip (or Country) DC		
	nail (optional) 5. Senste ID # earment@cov.com 11195-101		
7. Client Name Self Association of American Medical Colleges	6. House ID # 31827906		
TYPE OF REPORT 8. Year 2000 Midyear (January	1-June 30) 🖾 OR Year End (July1-December 31) 🗔		
9. Check if this filing amends a previously filed version	of this report		
10. Check if this is a Termination Report □ ⇒ Termi	nation Date 11. No Lobbying Activity		
INCOME OR EXPENSES - Complete Either Li	nc 12 OR Line 13		
12. Lobbying Firms	13. Organizations		
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating to lobbying activities for this reporting period were:		
Less than \$10,000	Less than \$10,000 🔲		
\$10,000 or more \(\sigma \frac{\sigma \\$ 46,000 \\ \text{theorie* (nearest \$20,000)} \)	\$10,000 or more		
Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income for 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.		
, , , , , , , , , , , , , , , , , , , ,	Method A. Reporting amounts using LDA		
	definitions only Method B. Reporting amounts under section		
	6033(b)(8) of the Internal Revenue		
	Method C. Reporting amounts under 162(e) of the Internal Revenue Code		
	T THE STATE STATE STATE STATES		
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Signature Course	Date August 7, 2000		
Printed Name and Title 20004-2401			

registrant engaged in	TIVITY. Select as many o			
		ot during the reporting	reflect the general issue areas it g period. Using a separate pa- ded.	
15. General issue ar	ea code <u>HCR</u>	(one per page)		
16. Specific lobbyin	ig issues			
Support for grad Funding for bion Medical Innovati		r Medicare		
17. House(s) of Cong	gress and Federal agencies con	ntacted	☐ Check if None	
Senate				
18. Name of each in	idividual who acted as a lobbyt Name		cial Position (if applicable)	New
Rođerick A. DeArm	ant	Partaer	• ••	m
Joan L. Kutcher	16.31 & 	Legislative Couns	!	
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Signature	uddin 6	£	ate August 7, 2000	

Registrant Name	Cevington & Burling	Client Name	Association of American Medical Colleges		
19. Interest of each	foreign entity in the specific iss	ues listed on line 16	above	Check if None	
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Signature Printed Name and T		D	ate Aug	ust 7, 2000	
Printed Name and T	itle 20004-2401				