Clerk of the House of Representatives - Secretary of the Senate Legislative Resource Center B-106 Cannon Building Washington, DC 20515

Office of Public Records 232 Hart Building Washington, DC 20510

SECRETARY OF THE SENATE 00 MAR -6 PM 1:54

H.D.

## LOBBYING REPORT

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

1. Registrant Name		
American Association of Oral : M	laxillotacial Jurgeons	<u>}</u>
2. Address Check if different than previously reported		
9700 W. Bryn Mawr Are., Ro	sement, 1L 60018	
3. Principal Place of Business (if different from line 2)	-	
hertelle mentennen mer er en samme en	lip (or Country)	
4. Contact Name Telephone	E-mail (optional)	5. Senate ID #
Ms. Caro) OBitien 847 678-6200	Coloxiempagoms.org	6. House ID#
7. Client Name Cartal	•	1
	······································	31714000
TYPE OF REPORT 8. Year 1999 Midyear	(January 1-June 30) OR Year E	ind (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 1	1. No Lobbying Activity
INCOME OR EXPENSES - Complete Either	Line 12 OR Line 13	
12. Lobbying Firms	i3. Organiza	tions
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating to lobbying active period were:	ities for this reporting
Less than \$10,000 ·	Less than \$10,000 (	
\$10,000 or more	\$10,000 or more	
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 accounting method. See instructions for	
	☐ Method A. Reporting amounts using LDA definitions only	
	Method B. Reporting amounts under section 6033(b)(8)of the Internal Revenue Code	
	Method C. Reporting amounts under section 162(e) of the internal Revenue Code	
Signature Carol C. O Buri	· .	
Printed Name and Title Carol L. D' Brien, Ason . Ex	ewhire Director, Advancy	Government Affairs
LD-2 (REV. 6/98)	,	PAGE 1 of 5

American Association of Crae in Marcillotacial Surgeons Registrant Name Client	Name_SeH-
	ssary to reflect the general issue areas in which the registrant orting period. Using a separate page for each code, provide eded.
15. General issue area code HCR (one per page)	
16. Specific lobbying issues H.R. 216 H.R. 448	S. 374
HIR. 1136 H.R. 49 HIR. 358 HIR. 719 H.R. 1304	5.240
17. House(s) of Congress and Federal agencies contacted U-S. Senate.	Check if None
Department of Heat Department of Just Department of Just Department of La	entatives this Human Services rice boo
18. Name of each individual who acted as a lobbyist in the	
Ms. Carol O'Brien	Covered Official Position (if applicable) Nev
MZ. COOL O BY IGA	Q
NAMES AND ASSESSMENT OF THE PROPERTY OF THE PR	
and Arian Control of the Control of	
·	
19. Interest of each foreign entity in the specific issues listed of	
Signature Coult OBun	Date 2/3.9/00
Printed Name and Title (16161 1 . O' Brien, ASSOC	- Executive Director, Advancy ; Government Attains

Form 1.D-2 (Rev 6/98)

Prof 2\_15

LOBBYING ACTIVITY. Select as many codes as necessar engaged in lobbying on behalf of the client during the reporti information as requested. Attach additional page(s) as needed	ng period. Using a separate page for each code, p
15. General issue area code <u>INS</u> (one per page)	
16. Specific lobbying issues  14. R. 248  14. R. 448  15. 37  16. Specific lobbying issues  16. Specific lobbying issues  16. R. 248  17. R. 248  17. R. 248  17. R. 248  18.	-{ o
17. House(s) of Congress and Federal agencies contacted  V.S. Senate  V.S. Have of Representa  Department of Health  Department of Labor  Department of J.S.	D Check if None thres Theman Services Thee
18. Name of each individual who acted as a lobbyist in this  Name	issue area  Covered Official Position (if applicable)
Ms. Carol O'Brien	
AND THE RESIDENCE OF THE PROPERTY OF THE PROPE	
	WILLIAN AND THE
WALANA MARKATAN MARKA	ALIMILLAMINA INTERNATIONAL INT
	113 1984 1984 1984 1984 1984 1984 1984 1984
19. Interest of each foreign entity in the specific issues listed on l	ine 16 above
Signature Carol L. O. Bui	Date 2/29/00
Signature Care L. O. Buri Printed Name and Title Child L. D'Brien, Assot. Exe	reutire Director, Advocacy; Avenmen
Form I.D-2 (Rev 6/98)	Page +

American Association of Oxal i Maxillotacial Suggests Client N Registrant Name	fame_Self-	-				
LOBBYING ACTIVITY. Select as many codes as necessengaged in lobbying on behalf of the client during the report information as requested. Attach additional page(s) as need	YING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the registrant it in lobbying on behalf of the client during the reporting period. Using a separate page for each code, provide tion as requested. Attach additional page(s) as needed.					
15. General issue area code MMM (one per page)						
14 '16" Salls 20 12 15	5. 374 5. 240					
17. House(s) of Congress and Federal agencies contacted U.S. Senate U.S. Havse of Represe Department of Health Department of Jistee Department of Law 18. Name of each individual who acted as a lobbyist in this	Check if None intouting if the man Services  our sissue area					
Name	Covered Official Position (if applicable)	Nev				
Ms. Carol O'Biven						
		<u> </u>				
THE TAXABLE PROPERTY OF THE PR						
***************************************						
·						
7		0				
19. Interest of each foreign entity in the specific issues listed on						
Signature Cant C-O Bun  Printed Name and Title (4101 L. O'Brien Assor. E.	Date 2/27/05	<del></del>				
Printed Name and Title (401 L. D'Brien Assor. E.	acountie Director Achaeologis Agennment Alth	airs				

Form LD-2 (Rev 6/98)

dual who is no I	ip (or Country)  longer expected to act as a lobbyi	st for the client	
State/Z writies dual who is no I	onger expected to act as a lobbyi	st for the client	
dual who is no I	onger expected to act as a lobbyi	st for the client	
dual who is no I	longer expected to act as a lobbyi	st for the client	·
Tanya	onger expected to act as a lobbyi	st for the client	
rted that no long	ger pertain	·	· .
LIATED ORGANIZATIONS  and the following effiliated organization(s)  Name  Add  Add  Add  Add  Add  Add  Add  A		" ' · · · · · · · · · · · · · · · · · ·	
	-	(ON) AIM SHOW OF ON	
nization that is a	so longer affiliated with the regis	trant or client	3
dáress	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	Ownership percentage client
		·	
ign entity that n	o longer owns, or controls, or is	affiliated with the registr	ant, clicat
	nization that is a	Address  nization that is no longer affiliated with the regis  ddress  Principal place of business (city and state or country)	Address Principal Place of But (city and state or oc city and state or occurrent or occurren