

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  
02 AUG -8 F

## LOBBYING REPORT

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

1. Registrant Name <b>Griffin, Johnson, Dover &amp; Stewart, Inc.</b>			
2. Registrant Address <input type="checkbox"/> Check if different than previously reported Address <b>1300 Connecticut Avenue, NW</b> <b>Suite 600</b> City <b>Washington</b> State/Zip (or Country) <b>DC 20036</b> <b>USA</b>			
3. Principal Place of Business (if different from line 2) City _____ State/Zip (or Country) _____			
4. Contact Name <b>Peggy Kirk Zand</b>	Telephone <b>202/775-8116</b>	E-mail (optional) <b>pkzand@griffinjohnson.com</b>	5. Senate ID #
7. Client Name <input type="checkbox"/> Self <b>Deloitte Consulting</b>			6. House ID # <b>31587091</b>

**TYPE OF REPORT** 8. Year 2002 Midyear (January 1-June 30)  OR Year End (July 1-De

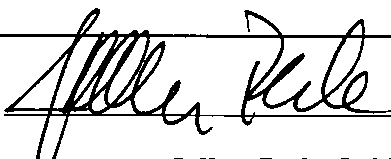
9. Check if this filing amends a previously filed version of this report

10. Check if this is a Termination Report  >> Termination Date 6/17/02 11. No Lobby

### INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms	13. Organizations
<b>INCOME</b> relating to lobbying activities for this reporting period was:	<b>EXPENSES</b> relating to lobbying activities for this reporting period were:
Less than \$10,000 <input type="checkbox"/>	Less than \$10,000 <input type="checkbox"/>
\$10,000 or more <input checked="" type="checkbox"/> >> \$ <u>\$160,000.00</u> Income (nearest \$20,000)	\$10,000 or more <input type="checkbox"/> >> \$ _____ Expenses (nearest \$20,000)
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).	<b>14. REPORTING METHOD.</b> Check box to indicate accounting method. See instructions for description of
	<input type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definition
	<input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 603 the Internal Revenue Code
	<input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162 Internal Revenue Code

Signature



Date 8/6/02



Registrant Name: Griffin, Johnson, Dover & Stewart, Inc.Client Name: Deloitte Consulting

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

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

16. Specific Lobbying issues

**Medicaid Administrative Outreach Program.**

17. House(s) of Congress and Federal agencies contacted  
**Department of Health & Human Services**  
**House of Representatives**  
**Senate**

 Check if None

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

Name	Covered Official Position (if applicable)
<b>Dover, G. Jack</b>	
<b>Griffin, Patrick J.</b>	<b>Dir. Leg. Affairs, White House</b>
<b>Johnson, David E.</b>	
<b>Krasow, Cristina</b>	
<b>Swinehart, Leonard</b>	

19. Interest of each foreign entity in the specific issues listed on line 16 above

 Check if None

Signature \_\_\_\_\_

Date 8/6/02



Registrant Name: Griffin, Johnson, Dover & Stewart, Inc.

Client Name: Deloitte Consulting

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

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

16. Specific Lobbying issues

**Medicaid Administrative Outreach Program.**

17. House(s) of Congress and Federal agencies contacted  Check if None  
**Department of Health & Human Services**  
**House of Representatives**  
**Senate**

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

Name	Covered Official Position (if applicable)
<b>Dover, G. Jack</b>	
<b>Griffin, Patrick J.</b>	<b>Dir. Leg. Affairs, White House</b>
<b>Johnson, David E.</b>	
<b>Krasow, Cristina</b>	
<b>Swinehart, Leonard</b>	

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

Signature \_\_\_\_\_ Date 8/6/02



Registrant Name: Griffin, Johnson, Dover & Stewart, Inc.

Client Name: Deloitte Consulting

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

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

16. Specific Lobbying issues

**Medicaid Administrative Outreach Program**

17. House(s) of Congress and Federal agencies contacted  Check if None  
**Department of Health & Human Services**  
**House of Representatives**  
**Senate**

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

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<b>Dover, G. Jack</b>	
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Signature \_\_\_\_\_ Date 8/6/02

