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# LOBBYING REPORT

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

1. Registrant Name Julia J. Norrell & Associates		
2. Address <input type="checkbox"/> Check if different than previously reported 601 Pennsylvania Avenue, N.W. South Building, Suite 900		
3. Principal Place of Business (if different from line 2) City: Washington State/Zip (or Country): DC 20004		
4. Contact Name	Telephone (202) 434-8192 E-mail (optional)	5. Senate ID# 2943651
7. Client Name <input type="checkbox"/> Self	Metropolitan Life Insurance Company	6. House ID# 31289004

**TYPE OF REPORT** 8. Year 2001 Midyear (January 1-June 30)  OR Year End (July 1-December 31)

9. Check if this is an amended version of a previously filed report

10. Check if this is a Termination Report  Termination Date \_\_\_\_\_

11. No Lobbying Activity

## 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 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>\$20,000</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 descriptive information. <input type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definition. <input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 6033(b) Internal Revenue Code <input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162(e) Internal Revenue Code

Printed Name and Title Julia J. Norrell, President  
LD-2 (Rev. 6/98)



**Registrant Name:** Julia J. Norrell & Associates **Client Name:** Metropolitan Life Insurance Co.

**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** (one per page)

INS

**16. Specific lobbying issues**

Medical Records Confidentiality Legislation

H.R. 2470

H.R. 1941

S. 881

S. 573

S. 578

Financial Privacy Legislation

H.R. 1339

H.R. 1340

S. 187

S. 753

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

U.S. House of Representatives

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

Julia J. Norrell

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

**Signature:** Julia J. Norrell, President **Date:** 08-15-01

**Printed Name and Title:** Julia J. Norrell, President



**Registrant Name:** Julia J. Norrell & Associates **Client Name:** Metropolitan Life Insurance Co.

**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** (one per page)

INS

**16. Specific lobbying issues**

Promote legislation to establish a Federal Employees Group Long-Term Care Insurance Program.

H.R. 110  
H.R. 1111  
H.R. 602

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

U.S. House of Representatives

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

Julia J. Norrell

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

**Signature:** Julia J. Norrell, President **Date:** 08-15-01

**Printed Name and Title:** Julia J. Norrell, President



**Registrant Name:** Julia J. Norrell & Associates **Client Name:** Metropolitan Life Insurance Co.

**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** (one per page)

TAX

**16. Specific lobbying issues**

Taxpayer Refund and Relief Act: H.R. 2488; S. 1429.

\*oppose inclusion of Administration's insurance tax provision

\*support deduction for premiums paid for long-term care insurance

\*support pension provisions to expand coverage

\*support subpart F exception for active financing income

\*support provision for publicly traded partnership.

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

U.S. House of Representatives

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

Julia J. Norrell

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

**Signature:**

*Julia J. Norrell, President*

**Date:**

08-15-01

**Printed Name and Title:** Julia J. Norrell, President

