



FEDERATED AMBULATORY SURGERY ASSOCIATION

700 North Fairfax Street Suite 306 Alexandria, VA 22314
Telephone: (703) 836-8808 Fax: (703) 549-0976 www.FASA.org

00000440611

January 5, 2004

Secretary of the Senate
Office of Public Records
232 Hart Building
Washington, DC 20510

To Whom It May Concern:

Thank you for speaking with me earlier concerning the Federated Ambulatory Surgery Association's lobbying reports. Attached are the Midyear 2002 and the Year End Report for 2002. It appears that these reports, which were mailed earlier, may not have reached your office. I have also included the 2003 Year End Report, which is due by February 14, 2004. If you need additional information so that we may be in compliance with reporting requirements, please contact me as soon as possible.

Thank you,

Cynthia Nikas
Assistant to the Executive Director

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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
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SECRETARY OF THE
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LOBBYING REPORT

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

1. Registrant Name <u>Federated Ambulatory Surgery Association</u>			
2. Address <input type="checkbox"/> Check if different than previously reported <u>700 North Fairfax Street, Suite 306</u>			
3. Principal Place of Business (if different from line 2) City: <u>Alexandria</u> State/Zip (or Country) <u>VA 22314</u>			
4. Contact Name <u>Kathy Bryant</u>	Telephone <u>703.836.8808</u>	E-mail (optional)	5. Senate ID # <u>52914</u>
7. Client Name <input type="checkbox"/> Self			6. House ID # <u>34914</u>

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

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 Lobbyin

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 type="checkbox"/> ⇨ \$ _____ 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 checked="" type="checkbox"/> ⇨ \$ <u>40,000</u> Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description of method.</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input checked="" type="checkbox"/> Method B. Reporting amounts under section 60 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 16 Internal Revenue Code</p>
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Signature *Kathy Bryant*

Printed Name and Title Kathy Bryant, Executive Director

LD-2 (REV. 6/98)

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Registrant Name Federated Ambulatory Client Name _____
surgery Association

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which engaged in lobbying on behalf of the client during the reporting period. Using a separate page for information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

Reimbursement for ASCs

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

CMS (formerly HCFA), House, Senate

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

Name	Covered Official Position (if applicable)
<u>Kathy Bryant</u>	

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

Signature [Handwritten Signature]

Date 11/7/03

Printed Name and Title

Kathy Bryant, Executive Director

Form LD-2 (Rev. 6/98)

Page