

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 THE SENATE

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LOBBYING REPORT

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

1. Registrant Name Hogan & Hartson L.L.P.			
2. Address <input type="checkbox"/> Check if different than previously reported 555 13th Street, N.W. Washington, DC 20004-1109			
3. Principal Place of Business (if different from line 2) City: _____ State/Zip (or Country) _____			
4. Contact Name Warnke, Christine	Telephone (202) 637-5645	E-mail (optional) CMWarnke@hhlaw.com	5. Senate ID # 18422
7. Client Name <input type="checkbox"/> Self YASOO Health, Inc.			6. House ID # 3047C

TYPE OF REPORT 8. Year 2003 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 Lobbying

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms

INCOME relating to lobbying activities for this reporting period was:

Less than \$10,000

\$10,000 or more ⇨ \$ _____
Income (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).

13. Organizations

EXPENSES relating to lobbying activities for this reporting period were:

Less than \$10,000

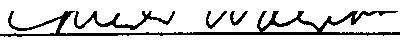
\$10,000 or more ⇨ \$ _____
Expenses (nearest \$20,000)

14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description of

Method A. Reporting amounts using LDA definition

Method B. Reporting amounts under section 603 Internal Revenue Code

Method C. Reporting amounts under section 163 Internal Revenue Code

Signature 

Printed Name and Title Warnke, Christine (Governmental Affairs Advisor)

LD-2 (REV. 6/98)

Printed Name and Title Warnke, Christine (Governmental Affairs Advisor)

Form LD-2 (Rev.6/98)

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00000231942

Registrant Name Hogan & Hartson L.L.P. Client Name YASOO Health, Inc.

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

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

16. Specific lobbying issues

FY 2004 Senate Defense Appropriations legislation;
FY 2004 House Defense Appropriations legislation;
FY 2004 Senate Homeland Security Appropriations; and
FY 2004 House Homeland Security Appropriations

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

Senate
House of Representatives

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

NOTE: To add the name of a lobbyist no longer employed by the firm, type the name into the drop down box above.
Name Covered Official Position (if applicable)

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

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Signature *Christine Warnke*

Date 07/24/2003

Printed Name and Title Warnke, Christine (Governmental Affairs Advisor)

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Registrant Name Hogan & Hartson L.L.P. Client Name YASOO Health, Inc.

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Information Update Page - Complete ONLY where registration information has changed.

20. Client new address

21. Client new principal place of business (if different from line 20)

City: _____ State: _____ Zip: _____

22. New general description of client's business or activities:

LOBBYIST UPDATE

23. Name of each previously reported individual who is no longer expected to act as a lobbyist for the client

ISSUE UPDATE

24. General lobbying issues previously reported that no longer pertain

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal Place of Bu (city and state or co	
		City:	Zip:

26. Name of each previously reported organization that is no longer affiliated with the registrant or client

FOREIGN ENTITIES

27. Add the following foreign entities

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities

28. Name of each previously reported foreign entity that no longer owns, or controls, or is affiliated with the registra affiliated organization

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Signature Christine Warnke Date 7-24-2003

Printed Name and Title Warnke, Christine (Governmental Affairs Advisor)

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