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07 SEP 13 PM

LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration ☐

1. Effective Date of Registration 9/11/07

2. House Identification Number _____ Senate Identification Number _____

REGISTRANT

3. Registrant name AMERICAN COLLEGE OF RHEUMATOLOGY

Address 1800 CENTURY PLACE, STE 250

City ATLANTA State GA Zip 30345

4. Principal place of business (if different from line 3)
City _____ State/Zip (or Country) _____

5. Telephone number and contact name
(404) 633-3777 Contact TIFFANY SCHMIDT, JD, MBA E-mail (optional) tschmidt@

6. General description of registrant's business or activities
ASSOCIATION - RHEUMATOLOGY / HEALTHCARE

CLIENT A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should be labeled "Self" and proceed to line 10. ☒ Self

7. Client name _____

Address _____

City _____ State _____ Zip _____

8. Principal place of business (if different from line 7)
City _____ State/Zip (or Country) _____

9. General description of client's business or activities _____

LOBBYISTS

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any person in this section has served as a "covered executive branch official" or "covered legislative branch official" within two years of acting as a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

Name	Covered Official Position (if applicable)
REBECCA Aiken HACKETT	

0000905247

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Form LD-1 (Rev. 06/98)

Registrant Name

Client Name

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LI

HCR MEO MMM

12. Specific lobbying issues (current and anticipated)

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HR 1283 / S. 626 ARTHRITIS PREVENTION CENTER AND CARE ACT of 2007

HR 1293/S. 1339 ACCESS TO MEDICARE MAINTENANCE ACT OF 2007

HK 3162 CHILDREN'S HEALTH & MEDICARE ACT OF 2007

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the registrant during a semiannual period and in whole or in major part plans, supervises or controls the registrant's lobbying activities?

☒ No $\Rightarrow$ Go to line 14.

☐ Yes ↓ Complete the rest of this section for each entity that meets the criteria above, then proceed to line 14.

Name	Address	Principal Place of Business (city and state or country)

14. Is there any foreign entity that:

- a) holds at least 20% equitable ownership in the client or any organization identified on line 13;
b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances (activities of the client or any organization identified on line 13; **OR**
c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in of the lobbying activity?

☒ No $\Rightarrow$ Sign and date the registration.

☐ Yes ↓ Complete the rest of this section for matching the criteria above, then sign registration.

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

Signature Mark Andrupel Date 9/11/07

The figure consists of 10 small diagrams arranged vertically, illustrating the stages of a cell's development. The diagrams show a progression from a single cell at the top to a complex, multi-layered structure at the bottom. The stages are labeled with numbers 1 through 10. The diagrams show the cell's internal structure, including the nucleus and various organelles, as they develop over time.

Printed Name and Title Mark Andrejeski Executive Vice President

Form LD-1 (Rev. 06/98)