48782-98-2001-08142001153839

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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LOBBYING REPORT

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

1. Registrant Name: JEFFERSON CONSULTING GROUP			
2. Address ☒ Check if different than previously reported 1401 K STREET, NW; SUITE 900			
City: WASHINGTON	State: DC Zip: 20005 Country: USA		
3. Principal place of business (if different from line 2) City: State: DC Zip: Country: USA			
4. Contact Name: SARAH B. LENGYEL	Telephone: 202-626-8550	Email: slengyel@jeffersonconsulting.com	5. Senate ID # 48782-98
7. Client Name: MAXIMUS			6. House ID # 34504010

Type of Report 8. Year (YYYY) 2001 Midyear (Jan 1-Jun 30) ◉ or Year End (Jul 1-Dec 31) ○

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 Activity ☐

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms	13. Organizations
INCOME relating to lobbying activities for this reporting period was: ☑ Less than $10,000 ($0.00 - $9,999.99) ☐ $10,000 or more	**EXPENSES** relating to lobbying activities for this reporting period were: ☐ Less than $10,000 ($0.00 - $9,999.99) ☐ $10,000 or more
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).	14. **REPORTING METHOD.** Check box to indicate expense accounting method. See instructions for description of options. ☐ Method A. Reporting amounts using LDA definitions only ☐ Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code ☐ Method C. Reporting amounts under section 162(e) of the Internal Revenue Code

Signature: [signature]

Printed Name: SARAH LENGYEL

Title: DIR. HR & ADMINISTRATION

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https://opr.senate.gov/cgi-win/ss_rep_viewer.exe

48782-90-2001-081420011153839

Registrant Name:
JEFFERSON CONSULTING GROUP

Client Name:
MAXIMUS

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. (issue area code MMM

16. (lobbying issues (current and anticipated)

School-based Medicaid reimbursement (sec 407) in Work Incentive Improvement Act

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

SENATE	HOUSE OF REPRESENTATIVES

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

Name	Covered Official Position (if applicable)
KANT, PETER	N/A
MCNAMARA, ANGELA	N/A
THOMPSON, ROBERT J.	N/A

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

Printed Name:
SARAH LENGYEL

Date: 8/14/01

Title:
DIR. HR & ADMINISTRATION



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Go to 'F

Registrant Name Jefferson Consulting Group, LLC Client Name Maximus

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

20. Client new address

Address

City State Zip Code Country

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

City State Zip Code Country

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

	First Name	Last Name	Suffix		First Name	Last Name	Suff
1	Angela	McNamara		3			
2				4			

ISSUE UPDATE

Find the code to select below.

24. General lobbying issues that **no longer** pertain

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal place of Business (city and state or country)
	Address C/S/Z Address C/S/Z	City State Country City State

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

1 2 3

FOREIGN ENTITIES

27. Add the following foreign entities

Name	Address Street Address City State/Province Country	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	Owne percer client
		City State Country		

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

1 3 5

2 4 6

Add a page for more up

Printed Name and Title

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