

**GOVERNMENT OF THE DISTRICT OF COLUMBIA  
BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY  
WASHINGTON, D.C. 20001**

Year 2012

☒ Original

☐ Amendment

**LOBBYIST ACTIVITY REPORT \***

(See next page for instructions)

ID# LOB000121922

Type of Report:



January 10th

If you are filing a January Report, please indicate whether you intend to lobby in the upcoming calendar year. ☒ Yes ☐ No



July \_\_\_\_\_

1. (a) Registrant's Name  
703-358-9100

Albers & Company

(b)

Daytime Phone

Number

(c) Permanent Address

1655 North Fort Myer Drive, Suite 700

Arlington, VA 22209

(Street Address)

(City, State, Zip Code)

(d)

Temporary

Address

(while

lobbying)

(Street Address)

(City, State, Zip Code)

2. Lobbyist (s) Working for Registrant: Attach a Supplemental Sheet if additional space is needed.

(a) Name

Martin Guy Rohling

(b) Name

Address

Albers & Company, 1655 North Fort

Address

(Street Address)

(Street Address)

Myer Drive, #700, Arlington, VA 22209

(City, State, Zip Code)

(City, State, Zip Code)

Daytime Phone Number

703-358-9100

Daytime Phone Number

3. Person Compensating Registrant

(a) Name

Lilly USA, LLC

(b) Daytime Phone Number

202-434-1034

(c)  
Address

555 12th Street NW, Suite 550

Washington, DC 20004

(Street Address)

(City, State, Zip Code)

(d) Nature of Business

Pharmaceuticals

4. Terms of Compensation: (a)

\$25,000/year

Salary

(b)

2012

Duration of Employment

5. Identify matter(s) by subject and formal designation on which the lobbyist/registrant expects to lobby. Attach a Supplemental Sheet if additional space is needed.

Pharmaceutical issues and Medicaid.

\* REMINDER – Each new or previously registered Lobbyist must file a Lobbyist Registration Form by January 15<sup>th</sup> of each year.

'13 JAN 10

6. Identify the official and title, if known, in the Executive or Legislative Branch with whom the registrant has had oral or written communication during the reporting period relating to lobbying activities, and the date that communication was made. Attach a Supplemental Sheet if additional space is needed.

Name Brendan Rose, DC Dept. of Insurance & Banking Date 7/13/2012

Name Councilmember Phil Mendelson Date 9/20/2012

Name Brendan Rose, DC Dept. of Insurance & Banking Date 11/13/2012

Name \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_

7. Total compensation/receipts paid to the Lobbyist for lobbying during the reporting period: \$ 12,500.00  
(Schedule A)

8. Total of other compensation/receipts received for lobbying services and compensation paid to others: \$ 89.33  
(Schedule A-1)

9. Total amount of Loans received by the Lobbyist in connection with lobbying during the reporting period: \$ 0.00  
(Schedule A-2)

10. Total receipts (Add Lines 7, 8, and 9) \$ 12,589.33

11. Total of expenditures made for purposes of lobbying during the reporting period: \$ 0.00  
(Schedule B)

12. Total of other expenditures related to lobbying activities: \$ 500.00  
(Schedule B-1)

13. Total expenditures (Add Lines 11 and 12) \$ 500.00

**BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY**  
**LOBBYIST/EMPLOYEE LOBBYIST'S ACTIVITY REPORT PAGE 1 OF 1**  
**SCHEDULE A – COMPENSATION/RECEIPTS PAID TO THE LOBBYIST FOR LOBBYING:**

**YEAR:** 2012

**Type of Report:** ☒ **January** 10th ☐ **July** \_\_\_\_\_

**Period Covering:** 7/1/2012 through 12/31/2012

**LOBBYIST/EMPLOYEE LOBBYIST'S NAME:** Albers & Company

COMPENSATION/RECEIPTS PAID FOR LOBBYING (AMOUNTS MAY BE ROUNDED OFF TO WHOLE DOLLARS)					TOTAL THIS PERIOD	CUMULATIVE TOTAL (FEES/COMPENSATION)
EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER (FEES/COMPENSATION)  Lilly USA, LLC 555 12th Street NW, Suite 650 Washington, DC 20004						
FEES/RETAINER	COMPENSATION					
\$ 12,500.00	\$				\$ 12,500.00	\$ 25,000.00
EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER (FEES/COMPENSATION)					TOTAL THIS PERIOD	CUMULATIVE TOTAL (FEES/COMPENSATION)
FEES/RETAINER	COMPENSATION					
\$	\$				\$	\$
EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER (FEES/COMPENSATION)					TOTAL THIS PERIOD	CUMULATIVE TOTAL (FEES/COMPENSATION)
FEES/RETAINER	COMPENSATION					
\$	\$				\$	\$
EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER (FEES/COMPENSATION)					TOTAL THIS PERIOD	CUMULATIVE TOTAL (FEES/COMPENSATION)
FEES/RETAINER	COMPENSATION					
\$	\$				\$	\$
<b>TOTAL RECEIPTS RECEIVED FOR LOBBYING (CARRY TOTAL FORWARD TO LINE 7)</b>					\$ 12,500.00	\$ 25,000.00

☐ IF MORE SPACE IS NEEDED, CHECK BOX AND ATTACH SUPPLEMENTAL SHEET  
 (SEE NEXT PAGE FOR INSTRUCTIONS)



**BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY**  
**LOBBYIST/EMPLOYEE LOBBYIST'S ACTIVITY REPORT**      **PAGE 1 OF 1**  
**SCHEDULE A-1 -- LOBBYIST COMPENSATION/RECEIPTS RECEIVED FOR**  
**LOBBYIST SERVICES AND COMPENSATION PAID TO OTHERS:**

**YEAR:** 2012

**Type of Report:** ☒ **January** 10th      ☐ **July** \_\_\_\_\_

**Period Covering:** 7/1/2012 through 12/31/2012

**LOBBYIST/EMPLOYEE LOBBYIST'S**

**NAME:** Albers & Company

OTHER COMPENSATION/RECEIPTS RECEIVED BY THE LOBBYIST AND/OR LOBBYIST EMPLOYEE AND PAID BY THE COMPENSATING REGISTRANT FOR LOBBYIST ACTIVITIES IN THE DISTRICT						TOTAL THIS PERIOD	CUMULATIVE TOTAL
<b>EMPLOYER'S NAME, ADDRESS, AND TELEPHONE NUMBER</b>							
Lilly USA, LLC 555 12th Street NW, Suite 650 Washington, DC 20004							
OFFICE EXPENSES	ADVERTISING & PUBLICATION EXP	PERSONAL EXPENSES	TRAVEL EXPENSES	COMPENSATION TO OTHER	OTHER EXPENSES		
\$ 0.00	\$ 0.00	\$ 0.00	\$ 89.33	\$ 0.00	\$ 0.00	\$ 89.33	\$ 681.31
<b>EMPLOYER'S NAME, ADDRESS, AND TELEPHONE NUMBER</b>							
OFFICE EXPENSES	ADVERTISING & PUBLICATION EXP	PERSONAL EXPENSES	TRAVEL EXPENSES	COMPENSATION TO OTHER	OTHER EXPENSES		
\$	\$	\$	\$	\$	\$	\$	\$
<b>EMPLOYER'S NAME, ADDRESS, AND TELEPHONE NUMBER</b>							
OFFICE EXPENSES	ADVERTISING & PUBLICATION EXP	PERSONAL EXPENSES	TRAVEL EXPENSES	COMPENSATION TO OTHER	OTHER EXPENSES		
\$	\$	\$	\$	\$	\$	\$	\$
<b>EMPLOYER'S NAME, ADDRESS, AND TELEPHONE NUMBER</b>							
OFFICE EXPENSES	ADVERTISING & PUBLICATION EXP	PERSONAL EXPENSES	TRAVEL EXPENSES	COMPENSATION TO OTHER	OTHER EXPENSES		
\$	\$	\$	\$	\$	\$	\$	\$
<b>TOTAL OTHER COMPENSATION/RECEIPTS RECEIVED FOR LOBBYING (CARRY TOTAL FORWARD TO LINE 8)</b>						\$ 89.33	\$ 681.31

☐ IF MORE SPACE IS NEEDED, CHECK BOX AND ATTACH SUPPLEMENTAL SHEET A-1  
(SEE NEXT PAGE FOR INSTRUCTIONS)

REV. 12/2012

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**BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY**  
**LOBBYIST/EMPLOYEE LOBBYIST'S ACTIVITY REPORT PAGE 1 OF 1**  
**SCHEDULE A-2 LOANS RECEIVED BY THE LOBBYIST**

YEAR: 2012

Type of Report: ☒ January 10th ☐ July \_\_\_\_\_

Period Covering: 7/1/2012 through 12/31/2012

LOBBYIST/EMPLOYEE LOBBYIST

NAME: Albers & Company

**LOANS RECEIVED IN CONNECTION WITH LOBBYING ACTIVITY.**

EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER					TOTAL LOANS THIS PERIOD TOTAL	CUMULATIVE LOAN TOTAL
LOAN						
\$	\$	\$	\$	\$	\$	\$
EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER					TOTAL LOANS THIS PERIOD TOTAL	CUMULATIVE LOAN TOTAL
LOAN						
\$	\$	\$	\$	\$	\$	\$
EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER					TOTAL LOANS THIS PERIOD TOTAL	CUMULATIVE LOAN TOTAL
LOAN						
\$	\$	\$	\$	\$	\$	\$
EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER TOTAL					TOTAL LOANS THIS PERIOD TOTAL	CUMULATIVE LOAN TOTAL
LOAN						
\$	\$	\$	\$	\$	\$	\$
TOTAL LOANS RECEIVED FOR THE PERIOD (CARRY TOTAL FORWARD TO LINE 9)					\$ 0.00	\$ 0.00
					\$ 0.00	\$ 0.00

☐ IF MORE SPACE IS NEEDED, CHECK BOX AND ATTACH SUPPLEMENTAL SHEET  
(SEE REVERSE SIDE FOR INSTRUCTIONS)

**BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY**  
**COMPENSATING REGISTRANT'S ACTIVITY REPORT**    PAGE 1 OF 1  
**SCHEDULE B – EXPENDITURES PAID BY COMPENSATING REGISTRANT TO THE LOBBYIST**  
**YEAR: 2012**

Type of Report: ☒ January 10th    ☐ July \_\_\_\_\_

Period Covering: 7/1/2012 through 12/31/2012

COMPENSATING REGISTRANT'S NAME: Albers & Company

PAYMENTS MADE IN CONNECTION WITH LOBBYING ACTIVITIES				
ACTIVITY EXPENSES INCURRED, OR PAID BY THE COMPENSATING REGISTRANT TO THE LOBBYIST AND/OR IN-HOUSE EMPLOYEE LOBBYIST FOR ACTIVITIES RELATIVE TO LOBBYING ACTIVITIES IN THE DISTRICT OF COLUMBIA.				
DATE	NAME AND ADDRESS OF PAYEE	PURPOSE OF COMPENSATION	TOTAL THIS PERIOD	CUMULATIVE TOTAL
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
<b>TOTAL EXPENDITURES PAID FOR LOBBYING</b> <b>(CARRY TOTAL FORWARD TO LINE 11)</b>			\$ 0.00	\$ 0.00

☐ IF MORE SPACE IS NEEDED, CHECK BOX AND ATTACH SUPPLEMENTAL SHEET  
 (SEE NEXT PAGE FOR INSTRUCTIONS)



**YEAR:** 2012

Period Covering: 7/1/2012 through 12/31/2012

**BOARD OF ETHICS AND  
GOVERNMENT  
ACCOUNTABILITY  
LOBBYIST ACTIVITY REPORT  
SCHEDULE C**      YEAR 2012  
(See next page for Instructions)

Type of Report: ☒ January 10th ☐ July \_\_\_\_\_

Covering Period 7/1/2012 through 12/31/2012

LOBBYIST/COMPENSATING'S REGISTRANT'S NAME: Albers & Company

DATE	NAME	NATURE OF EMPLOYMENT WITH REGISTRANT

I, the undersigned, declare under oath and on penalty of perjury that the statements contained on this Lobbyist Activity Report are to the best of my knowledge, true, correct, and complete.

Martin G. Rohling  
Signature of Registrant (or, if not an individual, an authorized officer or agent\* of registrant must sign). Martin Guy Rohling

\*The lobbyist retained by contract to provide lobbying services may not sign on behalf of the compensating registrant.

Subscribed and sworn to before me on this 10<sup>th</sup> day of January, 2013

My commission Expires: My Comm. Exps. 12/31, 2013

Alfred Brown  
Notary Public