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## LOBBYING REPORT

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

1. Registrant Name United American Nurses, AFL-CIO			
2. Address <input type="checkbox"/> Check if different than previously reported 600 Maryland Avenue, SW, Suite 100 West			
3. Principal Place of Business (if different from line 2) Washington DC, 20024-2571 City: State/zip (or Country)			
4. Contact Name Jay Witter	Telephone (202) 651-7118	E-mail (optional)	5. Senate ID # 91295-12
7. Client Name <input checked="" type="checkbox"/> Self			6. House ID # 36787000

**TYPE OF REPORT** 8. Year 2004 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	13. Organizations
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating to lobbying activities for this reporting period were:
Less than \$10,000 <input type="checkbox"/>	Less than \$10,000 <input checked="" type="checkbox"/>
\$10,000 or more <input type="checkbox"/> ⇨ \$ _____ Income (nearest \$20,000)	\$10,000 or more <input type="checkbox"/> ⇨ \$ _____ Expenses (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).	14. REPORTING METHOD. Check box to indicate the accounting method. See instructions for description of options.
	<input type="checkbox"/> Method A. Reporting amounts using LDA definition
	<input type="checkbox"/> Method B. Reporting amounts under section 6033 Internal Revenue Code
	<input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code

Signature \_\_\_\_\_

Filing #00264aaf-1b65-4f0f-99e5-199508813568 - Page 1 of 12

Date 8/12

SIGNATURE *[Handwritten Signature]*

Susan Bianchi-Sand, National Executive Director

Printed Name and Title

LD-2 (REV. 4/03)

PAGE 1 c

Registrant Name United American Nurses, AFL-CIO Client Name \_\_\_\_\_

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

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

16. Specific lobbying issues

S. 991/H.R. 3656 Registered Nurse Safe Staffing Act  
S. 720/H.R. 663 Patient Safety and Quality Act  
H.R. 745/S. 373 Mandatory overtime legislation  
H.R. 4316 Nurse Staffing Standards for Patient Quality Care Act

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

House and Senate

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

Name	Covered Official Position (if applicable)
Jay Witter IV	

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

Signature  Date 8/12

Printed Name and Title Joselyn Branch-Sando, National Executive Director

Form LD-2 (Rec. 4/03)

Page 2

Registrant Name United American Nurses, AFL-CIO Client Name \_\_\_\_\_

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

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

16. Specific lobbying issues

H.R. 3619/S. 1925 The Employee Free Choice Act  
FY 2005 Labor, HHS, and Education Appropriation bill  
S. 1637/H.R. 4520 FSC/ETI bill

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

House and Senate

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

Name	Covered Official Position (if applicable)
Jay Witter IV	

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

Signature *Susan Bianchi-Sand* Date 8/13

Printed Name and Title Susan Bianchi-Sano, National Executive Director

Form LD-2 (Rec. 4/03)

Page 3

Registrant Name United American Nurses, AFL-CIO Client Name \_\_\_\_\_

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

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

16. Specific lobbying issues

H.R. 1/S. 1 Medicare reform legislation

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

House and Senate

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

Name	Covered Official Position (if applicable)
Jay Witter IV	

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

Signature *Susan Bianchi-Sand* Date 8/12

Printed Name and Title \_\_\_\_\_

Form LD-2 (Rec. 4/03)

Page 4

Registrant Name United American Nurses, AFL-CIO Client Name \_\_\_\_\_

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

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

16. Specific lobbying issues

H.R. 2433 Health Care for Veterans of Project 112/Project SHAD Act of 2003  
H.R. 4231 DVA Nurse Recruitment and Retention Act of 2004

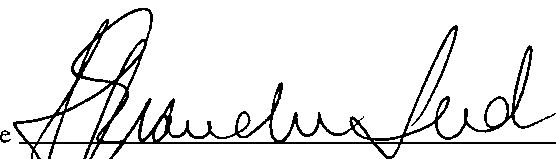

17. House(s) of Congress and Federal agencies contacted  Check if None

House and Senate

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

Name	Covered Official Position (if applicable)
Jay Witter IV	

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

Signature  Date 



Registrant Name United American Nurses, AFL-CIO Client Name \_\_\_\_\_

**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 (or 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 \_\_\_\_\_

**ISSUE UPDATE**

24. General lobbying issues previously reported that **no longer** pertain \_\_\_\_\_

**AFFILIATED ORGANIZATIONS**

25. Add the following affiliated organization(s)

Name	Address	Principal Place of B (city and state or cc

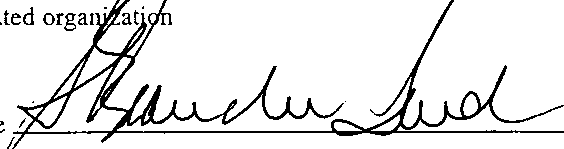
26. Name of each previously reported organization that is **no longer** affiliated with the registrant or client \_\_\_\_\_

**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 registrant, affiliated organization \_\_\_\_\_

Signature  Date 