

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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SECRETARY OF THE SENATE

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# LOBBYING REI

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

**1. Registrant Name**  Organization  Individual  
 Emergency Recovery Assistance, LLC (ERA)

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**2. Address**  Check if different than previously reported  
 Address1 1506 N County Road 1025 W Address2 \_\_\_\_\_  
 City Deputy State IN Zip Code 47250 - C

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**3. Principal place of business (if different than line 2)**  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ C

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<b>4a. Contact Name</b>	<b>b. Telephone Number</b>	<b>c. E-mail</b>	<b>5. S</b>
Mr. MICHAEL G. FLINT	(502) 227-9066	mflint@flintgroup.net	32
<b>7. Client Name</b> <input type="checkbox"/> Self			<b>6. F</b>
St. Bernard Health Care Center			39

**TYPE OF REPORT** 8. Year 2007 Midyear (January 1-June 30)  Year End (July 1-D

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 Act

## INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p><b>12. Lobbying</b></p> <p><b>INCOME</b> relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> \$ _____</p> <p>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).</p>	<p><b>13. Organizations</b></p> <p><b>EXPENSE</b> relating to lobbying activities for the were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> \$ _____</p> <p><b>14. REPORTING</b> Check box to indicate accounting method. See instructions for description</p> <p><input type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definition</p> <p><input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 6011 Internal Revenue Code</p> <p><input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162 Internal Revenue Code</p>
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Signature  Digitally Signed By: Michael Flint Date 03

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Printed Name and Title Michael Flint, President

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Printed Name and Title Michael Flint, President

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