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Washington, DC 20510

SECRETARY OF THE SENATE

04 JUL 28 PM 12:12

LOBBYING REPORT

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

1. Registrant Name The McManus Group			
2. Address ☐ Check if different than previously reported 660 Pennsylvania Ave., SE Suite 201			
3. Principal Place of Business (if different from line 2) City: Washington State/Zip (or Country) DC			
4. Contact Name John McManus	Telephone (202) 548-2317	E-mail (optional)	5. Senate 28
7. Client Name ☐ Self Federated Ambulatory Surgery Association			6. House 369

TYPE OF REPORT 8. Year 2004 Midyear (January 1-June 30) ☒ OR Year End (July 19. Check if this filing amends a previously filed version of this report ☐10. Check if this is a Termination Report ☐ ⇔ Termination Date _____

11. No Lob

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms INCOME relating to lobbying activities for this reporting period was: Less than \$10,000 ☐ \$10,000 or more ☒ ⇔ \$ <u>40,000</u> Income (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).	13. Organizations EXPENSES relating to lobbying activities for this period were: Less than \$10,000 ☒ \$10,000 or more ☐ ⇔ \$ _____ Expenses (nearest \$20,000) 14. REPORTING METHOD. Check box to indicate accounting method. See instructions for descriptive ☒ Method A. Reporting amounts using LDA de ☐ Method B. Reporting amounts under section Internal Revenue Code ☐ Method C. Reporting amounts under section Internal Revenue Code
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Signature _____

Printed Name and Title John McManus, President, The McManus Group

LD-2 (REV. 6/98)

Registrant Name The McManus Group Client Name Federated Ambulatory Surgical Association

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

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

16. Specific lobbying issues

NONE

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

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

Name	Covered Official Position (if applicable)
John McManus	Staff Director, Ways and Means Health Subcommittee

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

Signature _____ Date _____

Printed Name and Title John McManus, President, The McManus Group

Form LD-2 (Rev. 6/93)

Page

Registrant Name The McManus Group Client Name Federated Ambulatory Surgical Association

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

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

16. Specific lobbying issues

Ambulatory Surgery Centers
Medicare payment system

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

House of Representatives
Senate

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

Name	Covered Official Position (if applicable)
John McManus	Staff Director, Ways and Means Health Subcommittee

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

Signature

John McManus

Date

7/25/02

Printed Name and Title John McManus, President, The McManus Group

Form LD-2 (Rev. 6/93)

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