

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
---	--

RECEIVED  
SECRETARY OF THE SENATE

01 FEB 13 PM 4 48

### LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration

1. Effective Date of Registration September 1, 2000

2. House Identification Number \_\_\_\_\_ Senate Identification Number \_\_\_\_\_

#### REGISTRANT

3. Registrant Name CROWELL & MORING LLP

Address 1001 PENNSYLVANIA AVE., NW

City WASHINGTON State DC Zip 20004

4. Principal place of business (if different from line 3)

City \_\_\_\_\_ State/Zip (or Country) \_\_\_\_\_

5. Telephone number and contact name  
(202) 624-2870 Contact ROBERT L. ROTH E-mail (optional) rroth@crowmor.com

6. General description of registrant's business or activities  
LAW FIRM

**CLIENT** *A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should check the box labeled "Self" and proceed to line 10.  Self*

7. Client Name PALISADES GENERAL HOSPITAL

Address 700 RIVER ROAD

City NORTH BERGEN State NJ Zip 07047

8. Principal place of business (if different from line 7)

City \_\_\_\_\_ State/Zip (or Country) \_\_\_\_\_

9. General description of client's business or activities  
GENERAL ACUTE CARE HOSPITAL

#### LOBBYISTS

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any person listed in this section has served as a "covered executive branch official" or "covered legislative branch official" within two years of first acting as a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

Name	Covered Official Position (if applicable)
<u>ROBERT L. ROTH</u>	

Registrant Name CROWELL & MORING LLP

Client Name PALISADES GENERAL HOSPITAL

LOBBYING ISSUES

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1, page 1.

MMM

12. Specific lobbying issues (current and anticipated)

MEDICARE HOSPITAL PAYMENTS

AFFILIATED ORGANIZATIONS

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the registrant in a semiannual period and in whole or in major part plans, supervises or controls the registrant's lobbying activities?

[X] No -> Go to line 14.

[ ] Yes -> Complete the rest of this section for each entity matching the criteria above, then proceed to line 14.

Table with 3 columns: Name, Address, Principal Place of Business (city and state or country)

FOREIGN ENTITIES

14. Is there any foreign entity that:

- a) holds at least 20% equitable ownership in the client or any organization identified on line 13; or
b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or subsidizes activities of the client or any organization identified on line 13; or
c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in the outcome of the lobbying activity?

[X] No -> Sign and date the registration.

[ ] Yes -> Complete the rest of this section for each entity matching the criteria above, then sign and date the registration.

Table with 5 columns: Name, Address, Principal place of business (city and state or country), Amount of contribution for lobbying activities, Ownership percentage in client

Signature [Handwritten Signature] Date 2/12/01

Printed Name and Title ROBERT L. ROTH, PARTNER