

LOBBYING REPORT

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

1. Registrant Name:

UNITED CEREBRAL PALSY ASSN

2. Address:

1660 L STREET, NW, #700, WASHINGTON, DC 20036

3. Principal place of business (if different from line 2):

4. Contact Name: CHRISTOPHER THOMSON

Telephone: 2027760406

E-mail (optional): cthomson@ucp.org

Senate ID #: 39074-12

House ID #:

7. Client Name: Self

TYPE OF REPORT

8. Year 2007 Midyear (January 1 - June 30): **OR** Year End (July 1 - December 31):

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 Activity:

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: => 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 reporting period were:

Less than \$10,000:

\$10,000 or more: => Expenses (nearest \$20,000): 30,000.00

14. Reporting Method.

Check box to indicate expense accounting method. See instructions for description of options.

Method A. Reporting amounts using LDA definitions only

Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code

Method C. Reporting amounts under section 162(e) of the Internal Revenue Code

Registrant Name: UNITED CEREBRAL PALSY ASSN Client Name: Self

LOBBYING ACTIVITY

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

15. General issue area code: BUD (one per page)

16. Specific lobbying issues:

H.R. 3043/S.1710, L-HHS-ED Appropriations for FY 2008, all provisions dealing with education (IDEA), NCLB, human services, and employment for persons with disabilities.

17. House(s) of Congress and Federal agencies contacted:

Education, Dept of
HOUSE OF REPRESENTATIVES
Health & Human Services, Dept of (HHS)
Homeland Security, Dept of (DHS)
Housing & Urban Development, Dept of (HUD)
Justice, Dept of (DOJ)
Labor, Dept of (DOL)
Office of Management & Budget (OMB)
SENATE
Social Security Administration (SSA)
White House Office

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

Name: ALEXANDER, JON
Covered Official Position (if applicable): N/A
Name: BENNETT, STEPHEN
Covered Official Position (if applicable): N/A
Name: FORD, MARTHA
Covered Official Position (if applicable): N/A
Name: MARCHAND, PAUL
Covered Official Position (if applicable): N/A
Name: SAVAGE, ELIZABETH
Covered Official Position (if applicable): N/A
Name: STARR, JANNA
Covered Official Position (if applicable): N/A
Name: THOMSON, CHRIS
Covered Official Position (if applicable): N/A
Name: WARD, JULIE
Covered Official Position (if applicable): N/A

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

Registrant Name: UNITED CEREBRAL PALSY ASSN Client Name: Self

LOBBYING ACTIVITY

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

15. General issue area code: CIV (one per page)

16. Specific lobbying issues:

P.L. 108-446, Individuals with Disabilities Education Act implementation. Olmstead implementation.

17. House(s) of Congress and Federal agencies contacted:

Education, Dept of
Election Assistance Commission (EAC)
Equal Employment Opportunity Commission (EEOC)
HOUSE OF REPRESENTATIVES
Health & Human Services, Dept of (HHS)
Housing & Urban Development, Dept of (HUD)
Justice, Dept of (DOJ)
SENATE
White House Office

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

Name: FORD, MARTHA
Covered Official Position (if applicable): N/A
Name: HAGENSEN, ERIKA
Covered Official Position (if applicable): N/A
Name: MARCHAND, PAUL
Covered Official Position (if applicable): N/A
Name: SAVAGE, ELIZABETH
Covered Official Position (if applicable): N/A
Name: STARR, JANNA
Covered Official Position (if applicable): N/A

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

Registrant Name: UNITED CEREBRAL PALSY ASSN Client Name: Self

LOBBYING ACTIVITY

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

15. General issue area code: EDU (one per page)

16. Specific lobbying issues:

Workforce Investment Act Reauthorization, provisions dealing with employment for person with disabilities.

17. House(s) of Congress and Federal agencies contacted:

Education, Dept of
HOUSE OF REPRESENTATIVES
Labor, Dept of (DOL)
SENATE

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

Name: FORD, MARTHA
Covered Official Position (if applicable): N/A
Name: HAGENSEN, ERIKA
Covered Official Position (if applicable): N/A
Name: MARCHAND, PAUL
Covered Official Position (if applicable): N/A
Name: SAVAGE, ELIZABETH
Covered Official Position (if applicable): N/A
Name: STARR, JANNA
Covered Official Position (if applicable): N/A
Name: WARD, JULIE
Covered Official Position (if applicable): N/A

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

Registrant Name: UNITED CEREBRAL PALSY ASSN Client Name: Self

LOBBYING ACTIVITY

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

15. General issue area code: FAM (one per page)

16. Specific lobbying issues:

Family and Medical Leave Act regulations. Family support provisions in the Developmental Disabilities Assistance and Bill of Rights pending reauthorization.

17. House(s) of Congress and Federal agencies contacted:

HOUSE OF REPRESENTATIVES
Health & Human Services, Dept of (HHS)
SENATE

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

Name: FORD, MARTHA
Covered Official Position (if applicable): N/A
Name: SAVAGE, ELIZABETH
Covered Official Position (if applicable): N/A
Name: STARR, JANNA
Covered Official Position (if applicable): N/A
Name: WARD, JULIE
Covered Official Position (if applicable): N/A

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

Registrant Name: UNITED CEREBRAL PALSY ASSN Client Name: Self

LOBBYING ACTIVITY

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

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

16. Specific lobbying issues:

P.L. 108-173, Medicare Prescription Drug Modernization Act of 2003, implementation of provisions for dual eligibles.

17. House(s) of Congress and Federal agencies contacted:

Education, Dept of
HOUSE OF REPRESENTATIVES
Health & Human Services, Dept of (HHS)
SENATE
White House Office

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

Name: FORD, MARTHA
Covered Official Position (if applicable): N/A
Name: SAVAGE, ELIZABETH
Covered Official Position (if applicable): N/A
Name: STARR, JANNA
Covered Official Position (if applicable): N/A

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

Registrant Name: UNITED CEREBRAL PALSY ASSN Client Name: Self

LOBBYING ACTIVITY

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

15. General issue area code: HOU (one per page)

16. Specific lobbying issues:

S. 771, H.R. 1999, State and Local Housing Flexibility Act, provisions that address the needs of persons with disabilities.

17. House(s) of Congress and Federal agencies contacted:

HOUSE OF REPRESENTATIVES

Homeland Security, Dept of (DHS)

Housing & Urban Development, Dept of (HUD)

SENATE

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

Name: SAVAGE, ELIZABETH

Covered Official Position (if applicable): N/A

Name: STARR, JANNA

Covered Official Position (if applicable): N/A

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

Registrant Name: UNITED CEREBRAL PALSY ASSN Client Name: Self

LOBBYING ACTIVITY

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

15. General issue area code: IMM (one per page)

16. Specific lobbying issues:

Extension of benefits for legal residents who entered after August 22, 1996 and refugees and asylees.

17. House(s) of Congress and Federal agencies contacted:

HOUSE OF REPRESENTATIVES

SENATE

Social Security Administration (SSA)

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

Name: FORD, MARTHA

Covered Official Position (if applicable): N/A

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

Registrant Name: UNITED CEREBRAL PALSY ASSN Client Name: Self

LOBBYING ACTIVITY

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

15. General issue area code: LAW (one per page)

16. Specific lobbying issues:

Local Law Enforcement Enhancement Act of 2007, provisions dealing with protections for persons with disabilities.

17. House(s) of Congress and Federal agencies contacted:

Election Assistance Commission (EAC)
HOUSE OF REPRESENTATIVES
Health & Human Services, Dept of (HHS)
Justice, Dept of (DOJ)
Nat'l Council on Disability
SENATE
White House Office

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

Name: MARCHAND, PAUL
Covered Official Position (if applicable): N/A
Name: STARR, JANNA
Covered Official Position (if applicable): N/A

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

Registrant Name: UNITED CEREBRAL PALSY ASSN Client Name: Self

LOBBYING ACTIVITY

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

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

16. Specific lobbying issues:

Disability community concerns regarding employment, including implementation of P.L. 106-170, Ticket to Work and Work Incentives Improvement Act.

17. House(s) of Congress and Federal agencies contacted:

Education, Dept of
Health & Human Services, Dept of (HHS)
Labor, Dept of (DOL)
Social Security Administration (SSA)
White House Office

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

Name: FORD, MARTHA

Covered Official Position (if applicable): N/A

Name: MARCHAND, PAUL

Covered Official Position (if applicable): N/A

Name: WARD, JULIE

Covered Official Position (if applicable): N/A

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

Registrant Name: UNITED CEREBRAL PALSY ASSN Client Name: Self

LOBBYING ACTIVITY

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

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

16. Specific lobbying issues:

H.R. 1809, Medicare Independent Living Act of 2007, provisions that assist persons with disabilities. P.L. 109-171, Choice Act, Direct Support Professionals Fairness and Security Act, H.R. 1279.

17. House(s) of Congress and Federal agencies contacted:

Centers For Medicare and Medicaid Services (CMS)

HOUSE OF REPRESENTATIVES

Health & Human Services, Dept of (HHS)

SENATE

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

Name: FORD, MARTHA

Covered Official Position (if applicable): N/A

Name: MARCHAND, PAUL

Covered Official Position (if applicable): N/A

Name: SAVAGE, ELIZABETH

Covered Official Position (if applicable): N/A

Name: STARR, JANNA

Covered Official Position (if applicable): N/A

Name: WARD, JULIE

Covered Official Position (if applicable): N/A

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

Registrant Name: UNITED CEREBRAL PALSY ASSN Client Name: Self

LOBBYING ACTIVITY.

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

15. General issue area code: RET (one per page)

16. Specific lobbying issues:

Privatization of Social Security Trust Funds; improvements to Title II and Title XVI.

17. House(s) of Congress and Federal agencies contacted:

HOUSE OF REPRESENTATIVES

SENATE

Social Security Administration (SSA)

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

Name: FORD, MARTHA

Covered Official Position (if applicable): N/A

Name: WARD, JULIE

Covered Official Position (if applicable): N/A

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

Registrant Name: UNITED CEREBRAL PALSY ASSN Client Name: Self

LOBBYING ACTIVITY

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

15. General issue area code: TAX (one per page)

16. Specific lobbying issues:

H.R. 2206, Emergency Supplemental - U.S. Troop Readiness, Veterans' Care, Katrina Recovery, and Iraqi Accountability Appropriations Act of 2007, provisions dealing with the Work Opportunity Tax Credit., H.R. 2370, Financial Security Accounts for Individuals with Disabilities Act of 2007.

17. House(s) of Congress and Federal agencies contacted:

Commerce, Dept of (DOC)
HOUSE OF REPRESENTATIVES
SENATE
Treasury, Dept of

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

Name: FORD, MARTHA
Covered Official Position (if applicable): N/A
Name: MARCHAND, PAUL
Covered Official Position (if applicable): N/A
Name: STARR, JANNA
Covered Official Position (if applicable): N/A
Name: WARD, JULIE
Covered Official Position (if applicable): N/A

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

Registrant Name: UNITED CEREBRAL PALSY ASSN Client Name: Self

LOBBYING ACTIVITY.

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

15. General issue area code: TEC (one per page)

16. Specific lobbying issues:

Implementation of the Assistive Technology Act, provisions dealing with assistance to persons with disabilities.

17. House(s) of Congress and Federal agencies contacted:

Education, Dept of
HOUSE OF REPRESENTATIVES
Health & Human Services, Dept of (HHS)
SENATE

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

Name: STARR, JANNA
Covered Official Position (if applicable): N/A

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

Registrant Name: UNITED CEREBRAL PALSY ASSN Client Name: Self

LOBBYING ACTIVITY

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

15. General issue area code: TRA (one per page)

16. Specific lobbying issues:

Implementation of SAFETEA-LU and H.R. 3985, over the road bus accessibility.

17. House(s) of Congress and Federal agencies contacted:

HOUSE OF REPRESENTATIVES

SENATE

Transportation, Dept of (DOT)

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

Name: STARR, JANNA

Covered Official Position (if applicable): N/A

Name: WARD, JULIE

Covered Official Position (if applicable): N/A

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

Registrant Name: UNITED CEREBRAL PALSY ASSN Client Name: Self

LOBBYING ACTIVITY

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

15. General issue area code: UNM (one per page)

16. Specific lobbying issues:

Implementation of P.L. 106-170, Ticket to Work and Work Incentives Improvement Act of 1999, provisions dealing with employment for individuals with disabilities.

17. House(s) of Congress and Federal agencies contacted:

HOUSE OF REPRESENTATIVES
Health & Human Services, Dept of (HHS)
Labor, Dept of (DOL)
SENATE
Social Security Administration (SSA)

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

Name: FORD, MARTHA
Covered Official Position (if applicable): N/A
Name: WARD, JULIE
Covered Official Position (if applicable): N/A

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

Registrant Name: UNITED CEREBRAL PALSY ASSN Client Name: Self

LOBBYING ACTIVITY.

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

15. General issue area code: WEL (one per page)

16. Specific lobbying issues:

Regulations and policy to implement Supplemental Security Income and immigration changes in law for persons with disabilities.

17. House(s) of Congress and Federal agencies contacted:

HOUSE OF REPRESENTATIVES
Health & Human Services, Dept of (HHS)
Labor, Dept of (DOL)
SENATE
Social Security Administration (SSA)

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

Name: FORD, MARTHA
Covered Official Position (if applicable): N/A
Name: WARD, JULIE
Covered Official Position (if applicable): N/A

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

Signature: ON FILE Date: Feb 14, 2008

Printed Name and Title: CHRISTOPHER THOMSON, GENERAL C -

Information Update Page:

Complete ONLY where registration information has changed.

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 organization(s)

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

28. Name of each previously reported foreign entity the NO LONGER owns, OR controls, OR is affiliated with the registrant, client or affiliated organization

Signature: ON FILE Date: Feb 14, 2008

Printed Name and Title: -