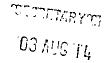
Clerk of the House of Representatives Legislative Resource Center B-106 Cannon Building Washington, DC 20515 Secretary of the Senate Office of Public Records 232 Hart Building Washington, DC 20510



LOBBYING REPORT

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

1.	Registrant Name Williams & Jensen, PC			
2.	Registrant Address	erent than previously reported State/Zip (or Country)	Suite 300 DC 20036	
3.	Principal Place of Business (if different fr	rom line 2)		
	City	State/Zip (or Country)		
4.	Contact Name Telephone E-mail (optional)		uil (optional)	5. Senate ID#
	Barbara W. Bonfiglio	202-659-8201		41454-517
7.	Client Name			6. House ID#
	National Association of Rehabi	ilitation Agencies		30771028
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Signature / IMA	April Dm fly No	Date 8/14/03
**	* "	
Printed Name and Title	Barbara W. Bonfiglio - Attorney	Page

Regi	istrant Name:	Williams & Jensen, PC					
Clie	nt Name:	National Association of Rehabilitation	Agencies				
enga	iged in lobbyin		y to reflect the general issue areas in which the registrant ng period. Using a separate page for each code, provide l.				
15.		General issue area code MMM (one per page)					
16.	Medicare cov Rules concer HCFA rules	verage and reimbursement ning medical records privacy for physician referrals oncerning medical records privacy erapy caps					
17.	House(s) of C House of Rep Senate	Congress and Federal agencies contacted presentatives	☐ Check if None				
18.	Name of each individual who acted as a lobbyist in this issue area						
*	Name		Covered Official Position (if applicable)				
	Lynch, Kari	na V.					
	Olsen, Georg	ge G.					
19.	Interest of ea	ch foreign entity in the specific issues liste	d on line 16 above Check if None				

Signature		Date	8/14/03	
Printed Name and Title	Barbara W. Bonfiglio - Attorney			_ Page