

SECRETARY OF THE
04 NOV -4 PMClerk of the House of Representatives
Legislative Resource Center
B-106 Cannon Building
Washington, DC 20515Secretary of the Senate
Office of Public Records
232 Hart Building
Washington, DC 20510**LOBBYING REPORT**

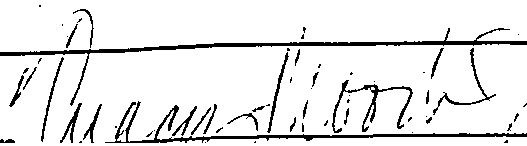
Lobbying Disclosure Act of 1995 (Section 5) - All Filers Are Required to Complete This Page

1. Registrant Name Alliance to Improve Medicare (AIM)			
2. Address <input type="checkbox"/> Check if different than previously reported 1001 Pennsylvania Avenue, NW, Suite 550 South, Washington, DC 20004			
3. Principal Place of Business (if different from line 2) City: _____ State/zip (or Country) _____			
4. Contact Name Tracey Moorhead (202) 452-1029 tmoorhead@hlc.org			5. Senate ID # 54643
7. Client Name <input type="checkbox"/> Self			6. House ID # 35064000

TYPE OF REPORT 8. Year 2003 Midyear (January 1-June 30) OR Year End (July 1-December)
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 **INCOME OR EXPENSES - Complete Either Line 12 OR Line 13**

<p align="center">12. Lobbying Firms</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ _____ Income (nearest \$20,000)</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 align="center">13. Organizations</p> <p>EXPENSES relating to lobbying activities for this reporting period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> ⇨ \$ <u>40,000</u> Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options.</p> <p><input checked="" type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b) Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code</p>
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Date 10/28/04

Signature

Tracey Moorhead, Executive Director

Printed Name and Title

LD-2 (REV. 4/03)

PAGE 1 of

Registrant Name Alliance to Improve Medicare Client Name _____

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

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

16. Specific lobbying issues

Medicare modernization and prescription drug benefit legislation and related proposals.
H.R. 1
S. 1

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

U.S. Senate
U.S. House of Representatives
U.S. Department of Health and Human Services

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

Name	Covered Official Position (if applicable)
Tracey Moorhead	

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

Signature *Tracey Moorhead* Date 10/28/04

