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## LOBBYING REPORT

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

1. Registrant Name McDermott, Will & Emery			
2. Address <input type="checkbox"/> Check if different than previously reported 600 13th Street, N.W., Washington, D.C. 20005-3096			
3. Principal Place of Business (if different from line 2) City: _____ State/Zip (or Country) _____			
4. Contact Name	Telephone	E-mail (optional)	5. Senate ID #
Karen S. Sealander	202-756-8024		24338-951
7. Client Name <input type="checkbox"/> Self			6. House ID #
The Women's Hospital of Greensboro			31445045

**TYPE OF REPORT** 8. Year 2001 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 Act

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13	
12. Lobbying Firms	13. Organizations
<b>INCOME</b> relating to lobbying activities for this reporting period was:	<b>EXPENSES</b> relating to lobbying activities for this report were:
Less than \$10,000 <input checked="" type="checkbox"/>	Less than \$10,000 <input type="checkbox"/>
\$10,000 or more <input type="checkbox"/> - \$ _____ Income (nearest \$20,000)	\$10,000 or more <input type="checkbox"/> - \$ _____ Expenses (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).	<b>14. REPORTING METHOD.</b> Check box to indicate accounting method: See instructions for description of method.
	<input type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definition
	<input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 6 of the Internal Revenue Code
	<input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 1 of the Internal Revenue Code

Signature \_\_\_\_\_

*Karen S. Sealander*

Printed Name and Title Karen S. Sealander, Counsel



Registrant Name McDermott, Will & Emery Client Name The Women's Hospital of Greensboro

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which 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

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)
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....

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

Signature *Karen S. Sealander* Date August 9, 2001

Printed Name and Title Karen S. Sealander, Counsel



Registrant Name McDermott, Will & Emery Client Name The Women's Hospital of Greensboro

**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

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)
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....

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

Signature *Karen S. Sealander* Date August 9, 2001

Printed Name and Title Karen S. Sealander, Counsel

