

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 2:

1. Registrant Name NIXON PEABODY LLP			
2. Address <input type="checkbox"/> Check if different than previously reported 401 9th Street, N.W., Suite 900			
3. Principal Place of Business (if different from line 2) City Washington State/Zip (or County) D.C. 20004			
4. Contact Name Randall Kelly		Telephone (202) 585-8000	5. Senate I E-mail (optional)
7. Client Name <input type="checkbox"/> Self DIVERSIFIED HOUSING SERVICES, INC			6. House I 30907033

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 Ac

INCOME OR EXPENSES – Complete Either Line 12 OR Line 13	
12. Lobbying Firms	13. Organizations
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating to lobbying activities for this period 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).	14. REPORTING METHOD. Check box to indicate reporting method. See instructions for description. <input type="checkbox"/> Method A. Reporting amounts using LDA de <input type="checkbox"/> Method B. Reporting amounts under section the Internal Revenue Code <input type="checkbox"/> Method C. Reporting amounts under section Internal Revenue Code

Signature 
Printed Name and Title **RICHARD MICHAEL PRICE, PARTNER**



Registrant Name NIXON PEABODY LLP Client Name DIVERSIFIED HOUSING SERVICES, INC.

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

15. General issue area code _____ (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 _____ Date _____

Printed Name and Title _____

