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05 FEB 23 AM 10: 36

LOBBYING REPORT

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

| 1. Registrant name | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| Organization Philip W. Johnston Associates | | | | | |
| 2. Address Check if different than previously reported | | | | | |
| 7200 Wisconsin Ave | Suite 210 | | | | |
| City Bethesda State MI | D Zip Code 20814 Country USA | | | | |
| 3. Principal place of business (if different than line 2) | | | | | |
| Ony | A Zip Code 02110 Country US/ | | | | |
| 4a. Contact Name b. Telephone number Prefix Full Name | c. E-mail 5. Senate ID # | | | | |
| Ms. Merrill Warschoff 301-347-0414 MWa | rschoff@aol.com 20788-51 | | | | |
| 7. Client Name 6. House ID # National Association of Community Health Centers 3404500 | | | | | |
| 9. Check if this filing amends a previously filed version of this report 10. Check if this is a Termination Report ⇒ Termination Date INCOME OR EXPENSES - Complete Either Line 12 | 2 OR Line 13 | | | | |
| 12. Lobbying Firms | 13. Organizations | | | | |
| NCOME relating to lobbying activities for this reporting period was: EXPENSES relating to lobbying activities for were: | | | | | |
| Less than \$10,000 🗵 | Less than \$10,000 | | | | |
| \$10,000 or more | \$10,000 or more □ ⇒ \$ | | | | |
| Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income from the client (including all | 14. REPORTING METHOD. Check box to indicate exper accounting method. See instructions for description of optio | | | | |
| payments to the registrant by any other entity for lobbying activities on behalf of the client). | Method A. Reporting amounts using LDA definitions on Method B. Reporting amounts under section 6033(b)(8) Internal Revenue Code | | | | |
| | Method C. Reporting amounts under section 162(e) of the Revenue Code | | | | |
| | | | | | |

LD-2DS (Rev.)

Page 1

| Registrant Name_ | Philip W. Johnston Associa | ates | Client Name | National Association of Community H |
|-------------------|-------------------------------------------------------------------------------------|--------------------|--------------------|---------------------------------------------------------------------------------------|
| engaged in lobb | CTIVITY. Select as mar ying on behalf of the client equested. Attach addition | t during the repo | rting period. | et the general issue areas in which the r Using a separate page for each code |
| 15. General issu | e area code BUD - Budge | t/Appropriations | | (one per page) |
| 16. Specific lob | bying issues | A | ld page to continu | ue specific Issues description for this issue |
| Annual appr | opriation for health center p | rogram. | , | |
| 17. House(s) of | Congress and Federal age | ncies contacted | Check if | fNone |
| | presentatives ch individual who acted as | a Johnvist in th | ic iccue area | |
| First Name | Name Last Name | Suffix | | Add a page to continue additing lobbyists for the d Official Position (if applicable) |
| Merrill | Warschoff | | V/A | |
| .,, | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| 10 Inter-at a f | each foreign entity in the s | necific issues lis | sted on line 16 | Sahove X Check if None |
| 17. Interest of e | sacti totetän enntä in nie s | hoomo manda m | nea on mie tt | CHOOK IT HOME |

LD-2DS (REV. 4/03)

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Page 2