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**GOVERNMENT RELATIONS
AND PUBLIC AFFAIRS**

February 13, 2003

Secretary of the Senate
Office of Public Records
232 Hart Senate Office Building
Washington, DC 20510

RE: Kahl-Pownall Advocates

When filing for the Year-End 2002 period, I noticed that we have previously been filing Kahl-Pownall Advocates in error. As you may know, FH|GPC is the government arm of Fleishman-Hillard, and as such, we handle all of the lobbying registrations and reporting. Previously, FH|GPC has been the registrant for this client, but in fact, it is Fleishman-Hillard that represents Kahl-Pownall Advocates. Attached is a corrected for LD-1 and a LD-2 for the period ending December 31, 2002. At this time, I ask that you withdraw the registration of FH|GPC as the official representative of Kahl-Pownall Advocates and replace it with Fleishman-Hillard.

As always, I welcome any questions you may have regarding this or other filings made on behalf of FH|GPC.

Best regards,

A handwritten signature in black ink, appearing to be 'J Shields', written over a white background.

Jeremy Shields
FH|GPC

A Fleishman-Hillard Company

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
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LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration 1. Effective Date of Registration 2/13/2003
2. House Identification Number 30781041 Senate Identification Number 14815-517

REGISTRANT

3. Registrant Name Fleishman-Hillard, Inc.
Address 1615 L Street, NW Suite 1000
City Washington State DC Zip 20036
4. Principal place of business (if different from line 3)
City _____ State/Zip (or Country) _____
5. Telephone number and contact name Contact E-Mail (optional)
202-737-0100 Jeremy Shields shieldsj@fh-gpc.com
6. General description of registrant's business or activities
Public relations firm

CLIENT

A lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should be labeled "Self" and proceed to line 10. Self

7. Client Name Kahl Pownall Advocates
Address 1115 11th Street Suite 100
City Sacramento State CA Zip 95814
8. Principal place of business (if different from line 7)
City _____ State/Zip (or Country) _____
9. General description of client's business or activities
Research consultants and advocates

LOBBYISTS

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any person listed in this section has served as a "covered executive branch official" or "covered legislative branch official" within two years of first acting as a lobbyist for this client, state the executive and/or legislative position(s) in which the person served.

Name	Covered Official Position (if applicable)
<u>Bill Black</u>	
<u>Kathleen Siedlecki</u>	

Registrant Name: Fleishman-Hillard, Inc.

Client Name: Kahl Pownall Advocates

LOBBYING ISSUES

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1, page 1.

HCR, MMM

12. Specific lobbying issues (current and anticipated)

AFFILIATED ORGANIZATIONS

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the registrant in a semiannual period and in whole or major part plans, supervises, or controls the registrant's lobbying activities?

No. Go to line 14.

Yes. Complete the rest of this section for each entity matching the criteria above, then proceed to line 14.

Name	Address	Principal Place of Business (city and state or country)
Adventist Health Loma Linda University Medical Center	2100 Douglas Boulevard P.O. Box 19002 Roseville, CA 95661 9002 11234 Anderson Street P.O. Box 2000 Loma Linda, CA 92354	

FOREIGN ENTITIES

14. Is there any foreign entity that:

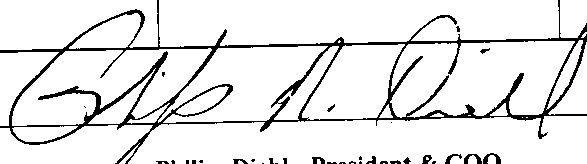
- a) holds at least 20% equitable ownership in the client or any organization identified on line 13; or
- b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances, or subsidizes activities of the client or any organization identified on line 13; or
- c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in the outcome of the lobbying activity?

No. Sign and date the registration.

Yes. Complete the rest of this section for each entity matching criteria above, then sign and date the registration.

Name	Address	Principal Place of Business (city and state or country)	Amount of contribution for lobbying activities

Signature



Date 2/13/2003

Printed Name and Title // Philip D. ...

Form LD-1 (Rev. 06/98)