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## LOBBYING REPORT

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

1. Registrant name <b>Vinson &amp; Elkins LLP</b>			
2. Address <b>1455 Pennsylvania Avenue, N.W., Suite 800, Washington, D.C. 20004-1008</b>			
3. Principal place of business (if different from line 2) City _____ State/Zip (or Country) _____			
4. Contact Name <b>Christine L. Vaughn</b>	Telephone <b>(202) 639-6500</b>	E-mail (optional)	5. Senate ID <b>40112-7</b>
7. Client Name <input type="checkbox"/> Self <b>Texas Children's Hospital</b>			6. House ID <b>314140</b>

**TYPE OF REPORT** 8. Year 2003 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

### 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 report were:
Less than \$10,000 <input type="checkbox"/>	Less than \$10,000 <input type="checkbox"/>
\$10,000 or more <input checked="" type="checkbox"/> ⇒ \$ <u>20,000</u> 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. <b>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 6011 of the Internal Revenue Code
	<input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162(e) of the Internal Revenue Code

Signature \_\_\_\_\_

Date \_\_\_\_\_

Printed Name and Title \_\_\_\_\_

F D 2 / P 6/08

Registrant Name Vinson & Elkins LLP Client Name Texas Children's Hospit

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas the registrant engaged in lobbying on behalf of the client during the reporting period. **Using a separ 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  
**Medicare reimbursement issues.**

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

**U.S. Senate**  
**U.S. House of Representatives**

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

Name	Covered Official Position (if applicable)
<b>Larry A. Oday</b>	
<b>Melissa K. Waugh</b>	

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

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name and Title \_\_\_\_\_

Form LD-2 (Rev 6/98)

Registrant Name Vinson & Elkins LLP Client Name Texas Children's Hospital

**Information Update Page - Complete ONLY where registration information has changed.**

20. Client new address

21. Client new principal place of business (if different from line 20)

City

State/Zip (or Country)

22. New general description of client's business or activities

**LOBBYIST UPDATE**

23. Name of each previously reported individual who is **no longer** expected to act as a lobbyist for the client

**Melissa K. Waugh**

**ISSUE UPDATE**

24. General lobbying issues previously reported that **no longer** pertain

**AFFILIATED ORGANIZATIONS**

25. Add the following affiliated organization(s)

Name	Address	Principal place of business (city and state or country)

26. Name of each previously reported organization that is **no longer** affiliated with the registrant or client

**FOREIGN ENTITIES**

27. Add the following foreign entities

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	Ownership percentage

28. Name of each previously reported foreign entity that **no longer** owns, **or** controls, **or** is affiliated with the registrant affiliated organization

Signature *Christine L. Vaughn* Date February 13, 200

Printed Name and Title Christine L. Vaughn, Partner

Form ID-2 (Rev. 6/98)