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LOBBYING REPORT

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

1. Registrant Name Powell, Goldstein, Frazer & Murphy LLP			
2. Address <input type="checkbox"/> Check if different than previously reported 1801 Pennsylvania Avenue, N.W., Suite 600, Washington, D.C. 20004			
3. Principal Place of Business (if different from line 2) City: N/A State/Zip (or Country):			
4. Contact Name Michael Fine	Telephone 202-347-0066	E-mail (optional)	5. Senate ID # 31942-606
7. Client Name <input type="checkbox"/> Self UnitedHealthcare Services	6. House ID # 31255058		

TYPE OF REPORT 8. Year 2000 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 December 31, 2000 11. No Lobbying Activity ☐

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 reporting period 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"/> ⇒ \$ _____ Expense (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 expense accounting method. See instructions for description of options. --- <input type="checkbox"/> Method A. Reporting amounts using LDA definitions only <input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code <input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code

Signature _____

Printed Name and Title _____

Registrant Name: Powell, Goldstein, Frazer & Murphy LLP

Client Name: UnitedHealthcare Services

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

Managed care reform (no specific legislation)
Quality Care for the Uninsured Act of 1999 (H.R. 2990)
Bipartisan Consensus Managed Care Act of 1999 (H.R. 2723)
Patients Bill of Rights Act of 1999 (S. 1344)
Comprehensive Access and Responsibility in Health Care Act of 1999 (H. R. 2926)

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

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

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

Name	Covered Official Position (if applicable)	New
Vlad Cartwright		<input type="checkbox"/>
Butler Derrick		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

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

Signature _____ Date _____

Printed Name and Title _____

Registrant Name: Powell, Goldstein, Frazer & Murphy LLP Client Name: UnitedHealthcare Services

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 MMM (one per page)

16. Specific lobbying issues

Medicare reform (no specific legislation)

Medicare & Choice Risk Adjustment Act of 1999 (H.R. 2419)

17. House(s) of Congress and Federal agencies contacted

☐ Check if None

U.S. House of Representatives

U.S. Senate

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

Name	Covered Official Position (if applicable)	New
Vlad Cartwright		<input type="checkbox"/>
Butler Derrick		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

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

Signature

Butler Derrick

Date

1/30/01

Printed Name and Title

Butler Derrick, Partner

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3. Principal Place of Business (if different from line 2) City: N/A State/Zip (or Country):			
4. Contact Name Michael Fine	Telephone (202) 347-8066	E-mail (optional)	5. Senate ID # 31942-645
7. Client Name <input type="checkbox"/> Self Union Pacific	6. House ID # 31255870		

TYPE OF REPORT 8. Year 2000 Midyear (January 1-June 30) ☐ OR Year End (July 1-December 31) ☒

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Signature

Printed Name and Title Butler Derrick, Partner