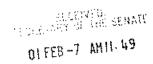


Clerk of the House of Representatives Legislative Resource Center 8-106 Cannon Building Washington, DC 20515

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

t. Registrent Namo							
Powell, Goldstein, Frazer & Murphy LLP							
Address Check if different than previously reported							
1801 Pennsylvania Avenue, N.W., Suite 600, Washington, D.C. 20004							
3. Frincipal Place of Business (if different from line 2)							
City: N/A	State/Zip (or Country)						
4. Contact Name Telephone	E-mail (optional)	5. Sensic ID#					
Michael Fine 202-347-0066	nael Fine 202-347-0066 31942-6						
7. Client Name 🚨 Self		6. House ID#					
UnitedHealthcare Services		31255058					
TYPE OF REPORT 8. Year 2009 Midyear (Janua	ry 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  11. No Lobbying Activity  12. No Lobbying Activity  13. No Lobbying Activity  14. No Lobbying Activity  15. No Lobbying Activity  16. Check if this is a Termination Report  17. No Lobbying Activity  18. No Lobbyin							
	INCOME OR EXPENSES - Complete Either Line 12 OR Line 13						
12. Lobbying Firms	13. Orga	zizations					
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating to lobbying as were:	ctivities for this reporting period					
Less than \$10,000 Q	Less than \$10,000 📮						
\$10,000 or more ISI \$ \$ 20,000   harone (hearest \$20,000)	\$10,000 or more 🖸 🗢 \$	Expenses (scares \$20,000)					
Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income from the client (including all payments accounting method. See instructions for description							
to the registrant by any other entity for lobbying activities on behalf of the client).							
or an onedy.	_	s under section 6033(b)(8) of the					
	Method C. Reporting amount Internal Revenue						
Signature							
Printed Name and Title							
Poun LD-2 (KEV. 40%) :CROKANPCEOCS/WSEF0032064		Page 3 of 3					

K	egistrant Name:	rowell, Galasien, Frazer & Murphy	LLP Client Name: UnitedHealthcare Serv	/ices
en	ngaged in lobbyi:	TIVITY. Select as many codes as nece ing on behalf of the client during the rep quested. Attach additional page(s) as nece	essary to reflect the general issue areas in which the corting period. Using a separate page for each code ded.	registram ), provide
15	i. General issue	area code HCR (one per page)		
16	<ol> <li>Specific lobby</li> </ol>	ying issues		
Qu Big Par	uality Care for th ipartisan Consens itients Bill of Rigl	rm (no specific legislation) ne Uninsured Act of 1999 (H.R. 2990) nus Managed Care Act of 1999 (H.R. 2723) hts Act of 1999 (S. 1344) cess and Responsibility in Health Care Act		
17	!. House(s) of C	ongress and Federal agencies contacted	Check if None	
U.	S. House of Re S. Senate  S. Name of each	··	s issue area	
18.	.S. Senate  3. Name of each	individual who acted as a lobbyist in this  Name	s issue area  Covered Official Position (if applicable)	New
V.:	S. Senate  Name of each  ad Cartwright	individual who acted as a lobbyist in this  Name	Covered Official Position (if applicable)	
V.:	S. Senate  Name of each  ad Cartwright	individual who acted as a lobbyist in this  Name	s issue area  Covered Official Position (if applicable)	٥
V.:	S. Senate  Name of each  ad Cartwright	individual who acted as a lobbyist in this  Name	Covered Official Position (if applicable)	0
V.:	S. Senate  3. Name of each  lad Cartwright  after Derrick	individual who acted as a lobbyist in this  Name	Covered Official Position (if applicable)	
V.:	S. Senate  3. Name of each  lad Cartwright  after Derrick	individual who acted as a lobbyist in this  Name	Covered Official Position (if applicable)	
V.:	S. Senate  3. Name of each  lad Cartwright  after Derrick	individual who acted as a lobbyist in this  Name	Covered Official Position (if applicable)	
Via  Via	S. Senate  3. Name of each  and Cartwright  after Derrick	individual who acted as a lobbyist in this  Name	Covered Official Position (if applicable)	

Form LC-2 (REV. 6/38)

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				
		ie area	ı	
	U.S. Senate	ie area Covered Official Position (if applicable)	New	
	U.S. Senate  18. Name of each individual who acted as a lobbyist in this issu  Name		New Q	
	U.S. Senate  18. Name of each individual who acted as a lobbyist in this issu  Name  Viad Cartwright			
	U.S. Senate  18. Name of each individual who acted as a lobbyist in this issu  Name		Q	
	U.S. Senate  18. Name of each individual who acted as a lobbyist in this issu  Name  Viad Cartwright		Q Q	
	U.S. Senate  18. Name of each individual who acted as a lobbyist in this issu  Name  Viad Cartwright		Q Q	
	U.S. Senate  18. Name of each individual who acted as a lobbyist in this issu  Name  Viad Cartwright		0 0	
	U.S. Senate  18. Name of each individual who acted as a lobbyist in this issu  Name  Viad Cartwright		0	

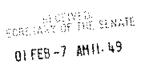
Page 3 of 3

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SCRETARY SEE SEA

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## LOBBYING REPORT

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

	ar require to complete tips tage				
1. Registrant Name Powell, Goldstein, Fruzer & Murphy, LLP					
Address G Check if different than previously reported     1001 Pennsylvania Avenue, N.W., 6th Floor, Washington	, D.C. 20004				
3. Principal Place of Business (if different from line 2)					
City: N/A State	Zip (or Country)				
4. Contact Name Telephone Michael Fine (202) 347-8066	E-mail (optional) 5. Senate ID # 31942-645				
7. Client Name 🔲 Self Union Pacific	6. Rouse ID # 31255970				
FYPE OF REPORT 8. Year 2000 Midyear Ganu  9. Check if this filing amends a previously filed version of this report.  10. Check if this is a Termination Report					
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 😫 (no income)	Less than \$10,000 🚨				
\$10,000 or more 🖸 🗢 \$	\$10,000 or more				
become (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	14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options.				
to the registrent by any other entity for lobbying activities on behalf	☐ Method A. Reporting amounts using LDA definitions only				
of the client).	☐ Method B. Reporting amounts under section 6033(b)(8) of Internal Revenue Code				
	Method C. Reporting amounts under section 162(e) of the Internal Revenue Code				
Signature Signature					
Printed Name and Title Butler Derrick, Partner					
Form LT-3 (REV. 498). .::ODMANPCDCGWSHC03269.L	Pago L OE?				

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