

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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SECRETAR
04 APR 1**LOBBYING REPORT**

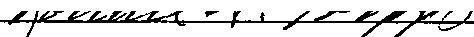
Lobbying Disclosure Act of 1995 (Section 5) - All Filers Are Required to Complete This Page

1. Registrant Name R.G. Flippo and Associates, Inc.			
2. Address <input type="checkbox"/> Check if different than previously reported 101 Constitution Avenue NW Suite 665 East, Washington, DC 20001			
3. Principal Place of Business (if different from line 2) City: _____ State/zip (or Country) _____			
4. Contact Name Vicki Wallace	Telephone (202) 638-8600	E-mail (optional) rgflippo@erols.com	5. Senate ID # 14861-24
7. Client Name <input type="checkbox"/> Self Alabama Nursing Home Association			6. House ID # 32095000

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 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>20,000.00</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. REPORTING METHOD. Check box to indicate exp accounting method. See instructions for description of op
	<input type="checkbox"/> Method A. Reporting amounts using LDA definition
	<input type="checkbox"/> Method B. Reporting amounts under section 6033(c) Internal Revenue Code
	<input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code



Signature  Date

Printed Name and Title Ronnie G. Flippo, President

LD-2 (REV. 4/03)

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Registrant Name R.G. Flippo and Associates, Inc. Client Name Alabama Nursing Home Association

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each cod information as requested. Attach additional page(s) as needed.

15. General issue area code BUD (one per page)

16. Specific lobbying issues

none

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

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

Name	Covered Official Position (if applicable)
Ronnie G. Flippo	
Vicki Wallace	

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

Signature *Ronnie G. Flippo* Date 1/29/04

Printed Name and Title Ronnie G. Pippo, President

Form LD-2 (Rec. 4/03)

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Registrant Name R.G. Flippo and Associates, Inc. Client Name Alabama Nursing Home Association

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each cod information as requested. Attach additional page(s) as needed.

15. General issue area code MMM (one per page)

16. Specific lobbying issues

H.R. 1, S. 1 (H. Rept. 108-391, P.L. 108-173) Prescription Drug and Medicare Improvements Act of 2003

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

US Senate
US House of Representatives

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

Name	Covered Official Position (if applicable)
Ronnie G. Flippo	
Vicki Wallace	

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

Signature *Ronnie G. Flippo* Date 1/29/04

Printed Name and Title Ronnie G. Flippo, President

Form LD-2 (Rec. 4/03)

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