Halsey, Rains & Associates, L.L.C.

OBERTARY OF THE SENATE

00 APR 27 PM 2: 28

H. O.

April 25, 2000

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

> RE: ID: 17396-36 National Association of Portable X-ray Providers

Dear Sir/Madam:

The House of Representatives has just notified me that they did not receive my report covering the period of July I, 1999 to December 31, 1999 in behalf of the National Association of Portable X-Ray Providers.

Upon receipt of their correspondence I immediately checked my records and found that this form was not prepared, signed and sent to either of your offices as I directed earlier this year. Please excuse the delay in the submission of this report and know that every effort will be made to see that this situation does not happen again.

Your assistance in processing and recording the enclosed report as a part of your records is respectfully requested. Thank you for your time an attention to this matter.

Sincerely,

Laurie D. Rains

Halsey, Rains and Associates, L.L.C.

LDR:db

Enclosures: Reports (3) cc: House of Representatives

2111 Wilson Boulevard • Suite 600 • Arlington, VA 22291 • Phose (703) 351-5077 • FAX (703) 351-5827 • e-mail HRALOBBY@anl.com

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

SECRETARY OF THE SENATE 00 APR 27 PH 2: 28

H.D.

LOBBYING REPORT

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

1. Registrant Name Halsey, Rains & Associates, LLC		
2. Address Check if different than previously reported 2111 Wilson Boulevard, Suite 600, Arling		77777774
3. Principal Place of Business (if different from line 2)	1- 1 -1111- - - - - - - -	
City: SAME State/	Zip (or Country)	
4. Contact Name Telephone	New: E-mail (optional)	5. Separe ID#
Laurie Rains (703) 379-79	994 Laurie@HalseyRains.com	17396-36
7. Chem Name		6. House ID # 34030002
Check if this filing amends a previously filed version of this: Oheck if this is a Termination Report □ ⇒ Termination INCOME OR EXPENSES - Complete Either	Date1	. No Lobbying Activity
12. Lobbying Firms	13. Organizati	ions
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating to lobbying activity period were:	ties for this reporting
Less than \$10,000 🔲	Less than \$10,000 🔘	
510.000 or more 🖸 🖘 💲 100,000	\$10,000 or more	res (nearest \$20,000)
Income (ocarest \$20,000) Provide a good faith estimate, rounded to the nearest \$20,000,	14. REPORTING METHOD. Check accounting method. See instructions for	box to indicate expense
of all lobbying related income from the client (including all payments to the registrant by any other entity for lobbying	Method A. Reporting amounts usin	ng LDA definitions only
rejuments to the regulation of any concernation for topoying [
	Method B. Reporting amounts und Internal Revenue Code	
activities on behalf of the client).		der section 162(e) of the
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Registrant Name Halsey, Rains & Assoc. Client	NameNational Assoc. of Portable X-Ray P	roviders
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15. General issue area code PMM (one per page)		
16. Specific lobbying issues		•
Tssues relating to portable X-ray service	s and medicare/medicaid.	•
•		
17. House(s) of Congress and Federal agencies contacted	Dan Care	
Small Business Administration House of Representatives United States Senate Health Care Financing Administration	Check if None	
18. Name of each individual who acted as a lobbyist in this	s issue area	_
Name	Covered Official Position (if applicable)	New
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Steven C. Halsey	and the second s	0
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19. Interest of each foreign entity in the specific issues listed on l Signature Laurie D. Rains, Partner	Date 4-26-2000	·······
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LOBBYING ACTIVITY. Select as many codes as nece engaged in lobbying on behalf of the client during the rep information as requested. Attach additional page(s) as ne	porting period. Using a separate page for each code pro-	trant vide
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Issues relating to portable X-ray service	ces and medicare/medicaid.	
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7. House(s) of Congress and Federal agencies contacted	☐ Check if None	
Small Business Administration	CRECK II FORE	
House of Representatives United States Senate		
Health Care Financing Administration		
Name Laurie D. Rains	Covered Official Position (if applicable)	New
Steven C. Halsey	t	۵
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9. Interest of each foreign entity in the specific issues listed on	line 16 above Check if None	í
ignature / awu & Rains	Date 4-26-2002)
rinted Name and Title Laurie D. Rains, Par	tner/Member of LLC	
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