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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02 AUG 21 PM 3: 29

LOBBYING REPORT

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

Registrant Name US Strategies Corporation			<u> </u>
2. Address Check if different than previo	usly reported		
Principal Place of Business (if different from Ii City: Alexandria	•	Zip (or Country) VA 22314	
4. Contact Name	Telephone	E-mail (optional)	5. Senate ID
Brad Traverse	(703) 739-799	bradt@usstrategies.com	38
7. Client Name Self			6. House ID#
Health South Corporation			33:
INCOME OR EXPENSES 12. Lobbying Firm		Line 12 OR Line 13 13. Organizat	ions
1480044484		***	ions
INCOME relating to lobbying activities period was:	for this reporting	EXPENSES relating to lobbying activi period were:	ties for this r
Less than \$10,000 🗀		Less than \$10,000	
\$10,000 or more	\$20,000.00	\$10,000 or more □ ⇒ \$	 -
	e (nearest \$20,000)	14. REPORTING METHOD. Check accounting method. See instructions for	ses (nearest \$20 box to indica description
	client (including all entity for lobbying	Method A. Reporting amounts using LDA defir	
	, <u> </u>	Method B. Reporting amounts under section 60 Internal Revenue Code	
		Method C. Reporting amounts under section 16 Internal Revenue Code	
Signature 2, My			

LD-2 (REV. 6/98)

00020353596

Registrant Name	US Strategies Corporation	Client Name	Health South Corporation
engaged in lobbying o	TTY. Select as many code on behalf of the client during ted. Attach additional page	ng the reporting perio	ect the general issue areas in which t d. Using a separate page for each c
15. General issue are	a code HCR (one	per page)	
Patient Bill of Right Medicare and Medi H.R. 4954	s S. 1052		
US Senate US House of Rep Department of He	cress and Federal agencies of presentatives ealth and Human Services ividual who acted as a lobb		Check if None
	Name	1	Covered Official Position (if applicable)
Brad Traverse Gary Capistrant Nance Guenther Peter Heidi Hanson James K. Wholey 19. Interest of each fore		s listed on line 16 abov	
Signature \(\sqrt{k}	My/m_		Date 08/06/02

Form LD-2 (Rev.6/98)