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3/2/07
DATE

LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check One: New Registrant New Client for Existing Registrant Amendment

1. Effective Date of Registration _____

2. House Identification 31445

Senate Identification 243

REGISTRANT Organization Individual

3. Registrant Organization McDermott Will & Emery LLP

Address 600 13th Street NW Address2 _____
City Washington State DC Zip 20005

4. Principal place of business (if different than line 3)

City _____ State _____ Zip _____

5. Contact name and telephone number

International Number

Contact Mr. Eric Zimmerman Telephone (202) 756-8148 E-mail ezimmerman@mwe.com

6. General description of registrant's business or activities

Law Firm

CLIENT *A Lobbying Firm is required to file a separate registration for each client. Organizations employing in-house lobbyists labeled "Self" and proceed to line 10.* Self

7. Client name Cookeville Regional Medical Center

Address 142 West Fifth Street
City Cookeville State TN Zip 38501

8. Principal place of business (if different than line 7)

City _____ State _____ Zip _____

9. General description of client's business or activities

Hospital

LOBBYISTS

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any this section has served as a "covered executive branch official" or "covered legislative branch official" within two years as a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

| Name | | | Covered Official Position (if applicable) |
|--------|-----------|--------|---|
| First | Last | Suffix | |
| Eric | Zimmerman | | |
| Maura | Dalton | | |
| Maggie | Mitchell | | |

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LOBBYING ISSUES

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1

MMM

12. Specific lobbying issues (current and anticipated)

Medicare reimbursement

AFFILIATED ORGANIZATIONS

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the registrant a semiannual period and in whole or in major part plans supervises or controls the registrant's lobbying activities?

No --> Go to line 14.

Yes --> Complete the rest of this section for each entity ma criteria above, then proceed to line 14.

| Name | Address | | | Principal Place of B |
|------|-------------|----------------|------------------|----------------------|
| | Street City | State/Province | Zip Code Country | |
| | | | | City |
| | | | | State Coun |
| | | | | City |
| | | | | State Coun |
| | | | | City |
| | | | | State Coun |

FOREIGN ENTITIES

14. Is there any foreign entity

- a) holds at least 20% equitable ownership in the client or any organization identified on line 13; or
- b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or subsidizes the client or any organization identified on line 13; or
- c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in the outcome lobbying activity?

No --> Sign and date the registration.

Yes --> Complete the rest of this section for each entity ma the criteria above, then sign the registration.

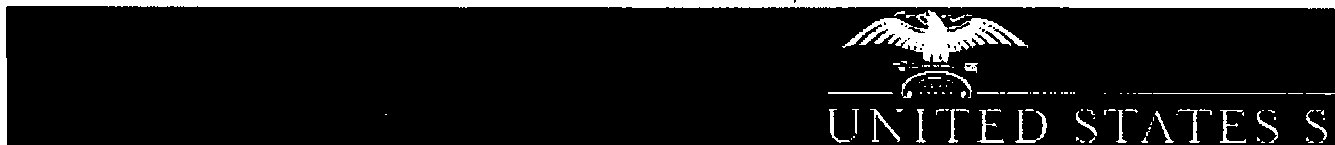
| Name | Address | | | Principal place of business (city and state or country) | Amount of contributi for lobbying activitie |
|------|-------------|----------------|---------|---|---|
| | Street City | State/Province | Country | | |
| | | | | City | |
| | | | | State Country | |
| | | | | City | |
| | | | | State Country | |

Signature Digitally Signed By: Maggie A Mitchell Date 0:

US, DST ACES Business Representative, ACES TrustID Business Certificate, Maggie A Mitchell

Printed Name and Title Maggie A. Mitchell, Associate Legislative Director

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Filing Status: Submitted

Your lobbying disclosure has been received and the confirmation number is listed below:

Receipt confirmation number: 200703021719421250

Received: Friday, March 02, 2007 5:19:42 PM

Registrant Name: McDermott Will & Emery LLP

Client Name: Cookeville Regional Medical Center

Senate ID: 24338-1001233

Form Type: NEW LD1

Report Year: 2007

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