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LOBBYING REPORT

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

1. Registrant Name McDermott, Will & Emery			
2. Address <input type="checkbox"/> Check if different than previously reported 600 13th Street, N.W.			
3. Principal Place of Business (if different from line 2) City: Washington, D.C. State/Zip (or Country) 20005-3096			
4. Contact Name Eric Zimmerman	Telephone 202/756-8148	E-mail (optional) ezimmerman@mwe.com	5. Senate ID # 24338-1356
7. Client Name <input type="checkbox"/> Self W. A. Foote Memorial Hospital			6. House ID # 31445129

8. Year **2001** 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 Activities

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 checked="" type="checkbox"/>	Less than \$10,000 <input type="checkbox"/>
\$10,000 or more <input type="checkbox"/> – \$ _____ 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 reporting method. See instructions for description of method.
	<input type="checkbox"/> Method A. Reporting amounts using LDA disclosure method
	<input type="checkbox"/> Method B. Reporting amounts under section 162(e) of the Internal Revenue Code
	<input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code

Signature

Printed Name and Title **Eric Zimmerman**

Registrant Name **McDermott, Will & Emery** Client Name **W.A. Foote Memorial Hospital**

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in registrant engaged in lobbying on behalf of the client during the reporting period. **Using a separate 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 reimbursement.

17. House(s) of Congress and Federal agencies contacted

Check if None

U.S. Senate

U.S. House of Representatives

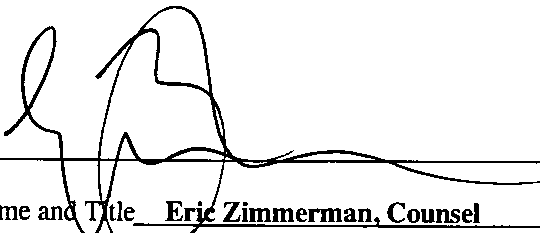
Health Care Financing Administration

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

Name	Covered Official Position (if applicable)
Eric Zimmerman	Counsel
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19. Interest of each foreign entity in the specific issues listed on line 16 above

Check if None

Signature  Date February 5, 2002

Printed Name and Title Eric Zimmerman, Counsel

