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## LOBBYING REPORT

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

|   |                                  |                            |                                   |
|---|----------------------------------|----------------------------|-----------------------------------|
| 1. Registrant Name<br><b>COONEY + ASSOCIATES, INC</b>   |                                  |                            |                                   |
| 2. Address <input type="checkbox"/> Check if different than previously reported<br><b>3910 KELLER AVENUE</b>          |                                  |                            |                                   |
| 3. Principal Place of Business (if different from line 2)<br>City: <b>ALEXANDRIA</b> State/Zip (or Country) <b>VA</b> |                                  |                            |                                   |
| 4. Contact Name<br><b>PATRICK COONEY</b>  | Telephone<br><b>703/933-0020</b> | E-mail (optional)<br>_____ | 5. Senate ID #<br><b>51104-12</b> |
| 7. Client Name <input type="checkbox"/> Self<br><b>AMERICAN PHYSICAL THERAPY ASSOCIATION</b>                          |                                  |                            | 6. House ID #<br><b>34751000</b>  |

TYPE OF REPORT 8. Year \_\_\_\_\_ 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 Activity

### 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</u><br>Income (nearest \$20,000)   | \$10,000 or more <input checked="" type="checkbox"/> ⇨ \$ _____<br>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 expense accounting method. See instructions for description of options. |
|  | <input type="checkbox"/> Method A. Reporting amounts using LDA definitions only                                     |
|  | <input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code          |
|  | <input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code              |

Signature

*Patrick Cooney*

Printed Name and Title

**PATRICK COONEY, PRESIDENT**

1377007 4/00

1377007 4/00

Registrant Name COONEY & ASSOC., INC. Client Name AMER. PHYSICAL THERAPY ASSOC.

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

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

16. Specific lobbying issues

H.R. 2698 - "New Workers for Economic Growth Act"  
S. 1440 - " "  
S. 2045 - "American Competitiveness in the Twenty-first Century Act of 2000"

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

House of Representatives  
Senate  
U.S. Immigration + Naturalization Service  
U.S. Department of Labor

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

| Name                  | Covered Official Position (if applicable) | New                      |
|-----------------------|---|--------------------------|
| <u>PATRICK COONEY</u> |   | <input type="checkbox"/> |
|                       |   | <input type="checkbox"/> |
|                       |   | <input type="checkbox"/> |
|                       |   | <input type="checkbox"/> |
|                       |   | <input type="checkbox"/> |
|                       |   | <input type="checkbox"/> |
|                       |   | <input type="checkbox"/> |
|                       |   | <input type="checkbox"/> |

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

Signature *Patrick Cooney* Date 2/14/2000  
Printed Name and Title PATRICK COONEY, PRESIDENT

Registrant Name COONEY + ASSOC., INC. Client Name AMER. PHYSICAL THERAPY ASSOC.

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

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

16. Specific lobbying issues

H.R. 1304 - "Quality Health Care Conditions Act of 1999"

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

House of Representatives  
Senate  
U.S. Department of Labor

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

| Name                  | Covered Official Position (if applicable) | Net                      |
|-----------------------|---|--------------------------|
| <u>PATRICK COONEY</u> |   | <input type="checkbox"/> |
|                       |   | <input type="checkbox"/> |
|                       |   | <input type="checkbox"/> |
|                       |   | <input type="checkbox"/> |
|                       |   | <input type="checkbox"/> |
|                       |   | <input type="checkbox"/> |
|                       |   | <input type="checkbox"/> |
|                       |   | <input type="checkbox"/> |

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

Signature *Patrick Cooney* Date 2/14/2000  
Printed Name and Title PATRICK COONEY, PRESIDENT

Registrant Name COONEY + ASSOC., INC. Client Name AMER. PHYSICAL THERAPY ASSOC.

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

The Balanced Budget Refinement Act of 1999 - H.R. 3426  
H.R. 1385, H.R. 1736, H.R. 1837, - RELATING TO THE \$1,500 CAP ON  
S.472 PT SERVICES  
H.R. 2050, H.R. 2051 - RELATING TO THE BAN ON PHYSICIAN SELF-REFERRAL

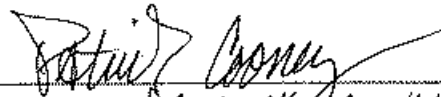
17. House(s) of Congress and Federal agencies contacted  Check if None

House of Representatives  
U.S. Senate  
U.S. Department of Health & Human Services

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

| Name                  | Covered Official Position (if applicable) | Yes                      |
|-----------------------|---|--------------------------|
| <u>PATRICK COONEY</u> |   | <input type="checkbox"/> |
|                       |   | <input type="checkbox"/> |
|                       |   | <input type="checkbox"/> |
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|                       |   | <input type="checkbox"/> |
|                       |   | <input type="checkbox"/> |

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

Signature  Date 2/14/2000  
Printed Name and Title PATRICK COONEY, PRESIDENT

Registrant Name COONEY & ASSOC., INC Client Name AMER. PHYSICAL THERAPY ASSOC.

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

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

16. Specific lobbying issues

S. 1344, H.R. 2990, H.R. 2723 - RELATING TO MANAGED HEALTH CARE REFORM

H.R. 3194 - FUNDING FOR RHHS FOR FY2000.  
S. 1650

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

House of Representatives  
Senate

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

| Name           | Covered Official Position (if applicable) | New                      |
|----------------|---|--------------------------|
| PATRICK COONEY |   | <input type="checkbox"/> |
|                |   | <input type="checkbox"/> |
|                |   | <input type="checkbox"/> |
|                |   | <input type="checkbox"/> |
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|                |   | <input type="checkbox"/> |
|                |   | <input type="checkbox"/> |

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

Signature Patrick Cooney Date 2/14/2000  
Printed Name and Title PATRICK COONEY, PRESIDENT