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## LOBBYING REPORT

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

1. Registrant name			
Organization		Winston & Strawn LLP	
2. Address <input type="checkbox"/> Check if different than previously reported			
Address 1 1700 K Street, N.W.			
City	Washington	State	DC
Zip Code	20006	Country	USA
3. Principal place of business (if different than line 2)			
City		State	
		Zip Code	
		Country	
4a. Contact Name		b. Telephone number	c. E-mail
Prefix	Full Name		
Mr.	Charles Kinney	202-282-5765	ckinney@winston.com
7. Client Name <input type="checkbox"/> Self		5. Senate ID #	
THSC, LLC		41682-243	
		6. House ID #	
		30511181	

TYPE OF REPORT 8. Year 2003 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:	
Less than \$10,000 <input checked="" type="checkbox"/>	
\$10,000 or more <input type="checkbox"/> ⇨ \$ _____	
EXPENSES relating to lobbying activities for this reporting period were:	
Less than \$10,000 <input type="checkbox"/>	
\$10,000 or more <input type="checkbox"/> ⇨ \$ _____	
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 Internal Revenue Code	
<input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code	

Form CD

Printed Name and Title Charles P. Sheets, Former Partner by Charles Kinney, Partner



Registrant Name Winston & Strawn LLP

**Client Name** THSC, LLC

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

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

## 16. Specific lobbying issues

Add page to continue specific issues description for this issue

## Medicaid certification issues.

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

**U.S. Senate**

U.S. House of Representatives

Dept. of Health & Human Services

18. Name of each individual who acted as a lobbyist in this issue area *Add a page to continue adding lobbyists for th*

[illegible]

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

Add a page for a differe

Printed Name and Title

Charles P. Sheets by Charles L. Kennerly

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