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SECRETARY OF THE SENATE
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LOBBYING REPORT

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

1. Registrant Name Michael R. Mabry			
2. Address <input type="checkbox"/> Check if different than previously reported 10201 Lee Highway, Suite 500			
3. Principal Place of Business (if different from line 2) Fairfax VA 22030 City: State/zip (or Country)			
4. Contact Name Michael R. Mabry	Telephone (703) 460-5561	E-mail (optional) mabry@sirweb.org	5. Senate ID # Y7agNyhE
7. Client Name <input checked="" type="checkbox"/> Self			6. House ID # 36141000

TYPE OF REPORT 8. Year 2004 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

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 type="checkbox"/> \$10,000 or more <input type="checkbox"/> ⇔ \$ _____ <small>Income (nearest \$20,000)</small>	EXPENSES relating to lobbying activities for this reporting period were: Less than \$10,000 <input type="checkbox"/> \$10,000 or more <input checked="" type="checkbox"/> ⇔ \$ <u>20,000.00</u> <small>Expenses (nearest \$20,000)</small>
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 exp accounting method. See instructions for description of opt <input type="checkbox"/> Method A. Reporting amounts using LDA definition <input checked="" type="checkbox"/> Method B. Reporting amounts under section 6033(f) Internal Revenue Code <input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code

Signature _____

Date **August 9, 2004**

Printed Name and Title

Michael R. Mabry, Assistant Executive Director for Policy

LD-2 (REV. 4/03)

PAGE 1 of

Registrant Name Michael R. Mabry Client Name _____

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

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

16. Specific lobbying issues

STOP stroke legislation
Abdominal aortic aneurysm screening legislation
Self-referral

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

US House of Representatives
US Senate
Centers for Medicare and Medicaid Services

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

Name	Covered Official Position (if applicable)
Michael R. Mabry	

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

Signature *Michael R. Mabry* Date 9Aug04

Printed Name and Title Michael R. Mabry, Assistant Executive Director for Policy

