

Clerk of the House of Representatives Legislative Resource Center B-106 Cannon Building Washington, DC 20515	Secretary of the Senate Office of Public Records 232 Hart Building Washington, DC 20510
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LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration 1. Effective Date of Registration 10/21/2003

2. House Identification Number _____ Senate Identification Number _____

REGISTRANT3. Registrant name Alston & Bird LLPAddress 601 Pennsylvania Avenue, N.W.City Washington, D.C.

State

Zip 20004-2601

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

City AtlantaState/Zip (or Country) GA/30309-3424

5. Telephone number and contact name

(202) 756-3342

Contact Jonathan M. WinerE-mail (optional) jwiner@alst

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 should check the labeled "Self" and proceed to line 10.* Self

7. Client name National Association for Home Care and HospiceAddress 228 Seventh Street, S.E.City WashingtonState DCZip 20003

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

City

State/Zip (or Country)

9. General description of client's business or activities

Health Care**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 pers in this section has served as a "covered executive branch official" or "covered legislative branch official" within two year acting 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)
Jennifer L. Butler	
Robert Dole	
C. M. Cameron Lynch	
John A. Cabell	

Registrant Name Alston & Bird LLP Client Name National Association for Home Care and Ho

LOBBYING ISSUES

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

HCR

12. Specific lobbying issues (current and anticipated)

Medicare and prescription drug coverage.

AFFILIATED ORGANIZATIONS

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the registra 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 matching t criteria above, then proceed to line 14.

Name	Address	Principal Place of Busines (city and state or country)

FOREIGN ENTITIES

14. Is there any foreign entity that:

- 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 subsidiz activities of 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 outco of the lobbying activity?

No ⇨ Sign and date the registration.

Yes ⇩ Complete the rest of this section for each e matching the criteria above, then sign and registration.

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	Ope in

Signature _____

Printed Name and Title Jonathan M. Winer - Counsel

Form LD-1 (Rev. 04/03)