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4/30/04
DATE

LOBBYING REPORT

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

1. Registrant Name The Commonwealth Group			
2. Address <input type="checkbox"/> Check if different than previously reported 1401 New York Avenue, NW Suite 810			
3. Principal Place of Business (if different from line 2) City: Washington State/Zip (or Country) DC 20005			
4. Contact Name Christopher T. Cushing	Telephone 202-789-4040	E-mail (optional)	5. Senate ID #
7. Client Name <input type="checkbox"/> Self Bascom Palmer Eye Institute	6. House ID # 32837024		

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 Activities

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms
INCOME relating to lobbying activities for this reporting period was:

Less than \$10,000

\$10,000 or more ⇒ \$ _____
Income (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).

13. Organizations
EXPENSES relating to lobbying activities for this reporting period were:

Less than \$10,000

\$10,000 or more ⇒ \$ _____
Expenses (nearest \$20,000)

14. REPORTING METHOD. Check box to indicate reporting method. See instructions for description of method.

- Method A. Reporting amounts using LDA definition
- Method B. Reporting amounts under section 6033(e) Internal Revenue Code
- Method C. Reporting amounts under section 162(e) Internal Revenue Code

Signature



Printed Name and Title Christopher T. Cushing, President

Registrant Name The Commonwealth Group Client Name Bascom Palmer Eye Institute

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 _____ (one per page)

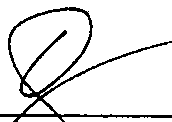
16. Specific lobbying issues

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

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

Name	Covered Official Position (if applicable)

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

Signature  Date 2/11/2004

Printed Name and Title Christopher T. Cushing, President

