

Printed Name and Title _____

Form LD-2 (Rev. 4/03)

Registrant Name Vinson & Elkins LLP Client Name AON Corp.

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas 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
Medicare & Choice Reimbursement

17. House(s) of Congress and Federal agencies contacted Check if None
U.S. House of Representatives
U.S. Senate

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

Name	Covered Official Position (if applicable)
Larry A. Oday	

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

Signature *Christine L. Vaughn* Date February 14, 201

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