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

SECRETARY OF THE SENATE

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LOBBYING REPORT

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

			•
American Association	of Homes and Services for the	e Aging	
	ferent than prevusly reported		
2519 Connecticut Ave	nue N.W., Washington, D.C. 20	0008-1520	
3. Principal Plac : of Bus ss (if di	fferent from line 2)		
City:	State/zip	(or Country)	
4. Contact Name	Telephon	E-mail (optional)	5. Senate ID #
Barbara Gay	(202) 508-9489	bgay@aahsa.org	
7. Client Name Self			6. House ID #
10 Check if this is a Tarmin	ation Report T C Termination	n Date	11 No Lobbyii
INCOME OR EXI	PENSES Complete Eith	T	
INCOME OR EXI		er Line 12 OR Line 13	13. Organizations
INCOME OR EXI	PENSES Complete Eith	er Line 12 OR Line 13	13. Organizations
INCOME OR EXI 12. Lot INCOME relating to lobby	PENSES Complete Eith	er Line 12 OR Line 13 EXPENSES relating to lo	13. Organizations
INCOME OR EXI 12. Lot INCOME relating to lobby period was:	PENSES Complete Eith	er Line 12 OR Line 13 EXPENSES relating to loperiod were:	13. Organizations obbying activities for this repo
INCOME OR EXI 12. Lot INCOME relating to lobby period was: Less than \$10,000 \$10,000 or more \$\text{\$\sigma}\$\$ Provide a good faith estimates \$\text{\$\sigma}\$\$	PENSES Complete Eith obying Firms ring activities for this reporting Income (nearest \$20,000) te, rounded to the nearest \$20,000,	EXPENSES relating to loperiod were: Less than \$10,000 \$10,000 or more 14. REPORTING MET	13. Organizations obbying activities for this repo Expenses (nearest \$20,00) HOD. Check box to indicate e
I2. Lob INCOME relating to lobby period was: Less than \$10,000 □ \$10,000 or more □ □ Provide a good faith estimate of all lobbying related incompayments to the registrant	PENSES Complete Eith bying Firms fing activities for this reporting Income (nearest \$20,000) te, rounded to the nearest \$20,000, ome from the client (including all by any other entity for lobbying	EXPENSES relating to loperiod were: Less than \$10,000 \$10,000 or more 14. REPORTING MET accounting method. See in	13. Organizations obbying activities for this repo Expenses (nearest \$20,00) HOD. Check box to indicate enstructions for description of constructions.
INCOME OR EXI 12. Lot INCOME relating to lobby period was: Less than \$10,000 \$10,000 or more \$\$\text{\$\	PENSES Complete Eith bying Firms fing activities for this reporting Income (nearest \$20,000) te, rounded to the nearest \$20,000, ome from the client (including all by any other entity for lobbying	EXPENSES relating to le period were: Less than \$10,000 \$10,000 or more 14. REPORTING MET accounting method. See in Method A. Reportion Method B. Reportion	13. Organizations obbying activities for this repo

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Ct	Date 8-14-03	
Signature —		
	Barbara Gay, Director of Information	
Printed Name and Title ————		
LD-2 (REV. 4/03)		PAGE 1

Registrant Name Association of Homes and Services for	Client Name
16. Specific lobbying issues	
facilities, eliminate the 15% cut in home health care sp funding for Social Services Block Grants H.R. 4954, Medicare Modernization and Prescription D. S. 812, Greater Access to Affordable Pharmaceuticals H.R. 3391, Medicare regulatory relief and contracting to	
17. House(s) of Congress and Federal agencies cont	acted
Senate 18. Name of each individual who acted as a lobbyis	et in this issue area
Name	Covered Official Position (if applicable)
19. Interest of each foreign entity in the specific issue	es listed on line 16 above
Signature	Date

Printed Name and Title		, <u></u>	
Form LD-2 (Rec. 4/03)			Page 2

Registrant Name Association of Homes and Services for C	lient Name
LOBBYING ACTIVITY. Select as many codes as a engaged in lobbying on behalf of the client during the information as requested. Attach additional page(s) as no 15. General issue area code MMM (one per page)	reporting period. Using a separate page for each co eeded.
16. Specific lobbying issues	
Inursing facilities	rotection Act, to extend Medicare payment add-ons for skilled , to repeal caps on Medicare coverage of outpatient therapy s Quality Improvement Act, to permit specially trained
17. House(s) of Congress and Federal agencies contacte	d Check if None
18. Name of each individual who acted as a lobbyist in	this issue area Covered Official Position (if applicable)
Name Will Bruno	Covered Official Position (if applicable)
19. Interest of each foreign entity in the specific issues lis	ted on line 16 above
Signature	Date

Printed Name and Title		 	 	· · · · · · · · · · · · · · · · · · ·		
Form LD-2 (Rec. 4/03)					Page _	3_

Registrant Name Association of Homes and Services for	Client Name
engaged in lobbying on behalf of the client during information as requested. Attach additional page(s) a	
15. General issue area code HOU (one per	r page)
16. Specific lobbying issues	
236 projects and mortgage insurance for integrated he	unding for HUD senior housing programs isions for a demonstration program for modernization of Section halth care facilities funding for senior housing repair, assisted living conversions,
17. House(s) of Congress and Federal agencies cont	acted
House of Representatives Senate 18. Name of each individual who acted as a lobbyis	t in this issue area
Name	Covered Official Position (if applicable)
Larry McNickle	
Linda Couch	
19. Interest of each foreign entity in the specific issue	s listed on line 16 above
Signature	Date

Printed Name and Title		

Page _____

Registrant Name Association of Homes and Services for	_ Client Name
LOBBYING ACTIVITY. Select as many codes engaged in lobbying on behalf of the client during information as requested. Attach additional page(s)	s as necessary to reflect the general issue areas in which the reporting period. Using a separate page for each coas needed.
15. General issue area code HCR (one pe	er page)
16. Specific lobbying issues	
H.R. 3487/S. 1864, Nurse Reinvestment Act, providin including certified nursing assistants	g incentives for the recruitment, training, and retention of nurses,
	<u> </u>
17. House(s) of Congress and Federal agencies con	ntacted
House of Representatives Senate	
18. Name of each individual who acted as a lobbyi	1
Name	Covered Official Position (if applicable)
Will Bruno	
	, we were
19. Interest of each foreign entity in the specific issu	es listed on line 16 above
Signature	Date

Printed Name and Title			

Page __**5**_

Registrant Name Association of Homes and Services for	Client Name
engaged in lobbying on behalf of the client during the information as requested. Attach additional page(s) as r	
15. General issue area code TAX (one per pa	age)
16. Specific lobbying issues	
H.R. 4946, Improving Access to Long-Term Care Act, procare insurance	viding an income tax deduction for the purchase of long-term
17. House(s) of Congress and Federal agencies contact	ed Check if None
House of Representatives 18. Name of each individual who acted as a lobbyist in	1 this issue area
Name	Covered Official Position (if applicable)
Will Bruno 19. Interest of each foreign entity in the specific issues l	isted on line 16 above
Signature	Date

Registrant Name Association of Homes and Services for Client	Name
LOBBYING ACTIVITY. Select as many codes as necessing engaged in lobbying on behalf of the client during the repeinformation as requested. Attach additional page(s) as needed	orting period. Using a separate page for each co
15. General issue area code (one per page)	
16. Specific lobbying issues	
H.R. 4600/S. 2793, HEALTH Act, medical malpractice reform	
17. House(s) of Congress and Federal agencies contacted	☐ Check if None
House of Representatives Senate 18. Name of each individual who acted as a lobbyist in this	issue area
Name	Covered Official Position (if applicable)
Will Bruno 19. Interest of each foreign entity in the specific issues listed of	on line 16 above
Signature	Date

Printed Name and Title	
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Page ____

Registrant Name	Association of Homes and Services for	Client Name	
engaged in lob	ACTIVITY. Select as many codes a bying on behalf of the client during the requested. Attach additional page(s) as	ne reporting period. Us	
15. General iss	ue area codeWEL (one per per per per per per per per per pe	page)	
16. Specific lol	obying issues		
Block Grants S 2489/H R	5241, Lifespan Respite Care Act, to assist ersonal Responsibility, Work, and Family P	family caregivers	
17. House(s) o	f Congress and Federal agencies contact	cted	if None
Senate	epresentatives		
18. Name of e	ach individual who acted as a lobbyist	in this issue area	
	Name	Cove	red Official Position (if applicable)
Linda Couch	each foreign entity in the specific issues	listed on line 16 above	☐ Check if None
Signature			Date

Printed Name and Title	 	

Page 8

Registrant Name	ociation of Home	es and Services for	lient Name		
Information Upo	date Page -	Complete ONLY wh	ere registration informa	ation l	has changed.
20. Client new address					
21. Client new principal	place of business	(if different from line 20)			
City 22. New general descrip	otion of client's bu	siness or activites	State/Zip (or Country)		
LOBBYIST UPD 23. Name of each p Darius Hende	reviously repor	rted individual who is	no longer expected to ac	t as a	lobbyist for the clier
ISSUE UPDATE 24. General lobbyir		ously reported that no	longer pertain		
AFFILIATED O 25. Add the following					
Na	nme		Address		Principal Place of E
26. Name of each p	previously repo	orted organization that	is no longer affiliated w	ith the	registrant or client
FOREIGN ENT 27. Add the follow		tities			
Name		Address	Principal place of busin (city and state or coun	ness itry)	Amount of contribution for lobbying activities
28. Name of each pre- affiliated organizat		foreign entity that no lo	onger owns, or controls, or	is affil	iated with the registran
Signature 100	Mana	J Dail	I	Date _	8-14-03
	ing #88491505-	560b-4c1e-be0d-9e85d1		-	

Printed Name and Title Barbara Gay, Director of Information

Form LD-2 (Rev. 4/03)

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