Clerk of the House of Representatives
Legislative Resource Center
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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 REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration 🔽	1. Effective Date of Registration 2/16/2005					
2. House Identification Number	Senate Identification Number					
REGISTRANT 3. Registrant name King & Spalding, LLP						
Address 1700 Pennsylvania Avenue, N.W.						
City Washington	State DC Zip 20006					
4. Principal place of business (if different from line 3) City	State/Zin (or Country)					
5. Telephone number and contact name	t Androw Mondo Fimoil (antional)					
6. General description of registrant's business or activit Law Firm						
labeled "Self" and proceed to line 10.						
Address 3663 Woodward Avenue, 5th Floor						
City Detroit	State MI Zip 48201					
8. Principal place of business (if different from line 7) City	्राह्म देशकार हुन्य स्थापन है।					
9. General description of client's business or activities Hospital System						
this section has served as a "covered executive bra	ed to act as a lobbyist for the client identified on line 7. If any panch official" or "covered legislative branch official" within two and/or legislative position(s) in which the person served.					
Name	Covered Official Position (if applic					
Andrew L. Woods						
Viraj Mirani						
010001000000000000000000000000000000000						

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legistrant Name	istrant NameKing & Spalding, LLP		Client Name	Detr	Detroit Medical Center		
LOBBYING 1	ISSUES ng issue areas. Select	all applicable	codes listed in instr	uctions and on the re	everse side of Form LD		
BUD HCF		РНА	TAX				
_	ng issues (current and s, health care legisl						
AFFILIATED  13. Is there an enti a semiannual p	ty other than the cl	ient that cont	ributes more than part plans, supervi	\$10,000 to the lob ses or controls the	bying activities of the registrant's lobbying		
☑ No⇔(	Go to line 14.		Yes   Complete the rest of the the criteria above, the		his section for each entiten en proceed to line 14.		
Name			Address		Principal Place of Bo (city and state or co		
FOREIGN E	MPTTIEC						
a) hold b) direction action c) is an	oreign entity that: s at least 20% equictly or indirectly, invities of the client	n whole or in or any organi ent or any org	major part, plans, zation identified c	supervises, contro on line 13; <b>or</b>	identified on line 13; ols, directs, finances on has a direct interest in		
<b>⊿</b> No⇔Sig	gn and date the reg	stration.	Yes	•	est of this section for iteria above, then sig		
Name		Address		ncipal place of business nd state or country)	Amount of contribution for lobbying activities		
Signature		M	· · · · · · · · · · · · · · · · · · ·	Date	8/26/6		

Form LD-1 (Rev. 06/98)