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04 FEB 17

## LOBBYING REPORT

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

1. Registrant Name <b>Carmen Group, Inc.</b>			
2. Registrant Address <input checked="" type="checkbox"/> Check if different than previously reported Address <b>1301 K Street, NW</b> Suite <b>800 East</b> City <b>Washington</b> State/Zip (or Country) <b>DC 20005</b>			
3. Principal Place of Business (if different from line 2) City _____ State/Zip (or Country) _____			
4. Contact Name <b>Michael E. Russell</b>		Telephone <b>202-785-0500</b>	E-mail (optional) _____
5. Senate ID # <b>8316-835</b>			6. House ID # <b>32029070</b>
7. Client Name <input type="checkbox"/> Self <b>Montefiore Medical Center</b>			

**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

### INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms	13. Organizations
<p><b>INCOME</b> relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> &gt;&gt; \$ <u>\$180,000.00</u> Income (nearest \$20,000)</p> <p>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).</p>	<p><b>EXPENSES</b> relating to lobbying activities for this reporting period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> &gt;&gt; \$ _____ Expenses (nearest \$20,000)</p> <p><b>14. REPORTING METHOD.</b> Check box to indicate accounting method. See instructions for description of</p> <p><input type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definition</p> <p><input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 603 of the Internal Revenue Code</p> <p><input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162 of the Internal Revenue Code</p>

Signature  Date 2/13/2004

Printed Name and Title Michael E. Russell - Chief Financial Officer Pa

Registrant Name: Carmen Group, Inc.

Client Name: Montefiore Medical Center

**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 BUD (one per page)

16. Specific Lobbying issues

**Departments of Commerce, Justice, and State, the Judiciary, and Related Agencies Appropriations Act, 200**

**Departments of Veterans Affairs and Housing and Urban Development, and Independent Agencies Appropriations Act, 2004**

**Departments of Labor, Health and Human Services, and Education, and Related Agencies Appropriations Act, 2004**

17. House(s) of Congress and Federal agencies contacted

Check if None

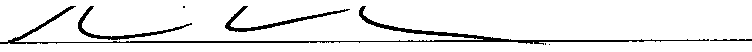
**Department of Energy**  
**Department of Health & Human Services**  
**House of Representatives**  
**Senate**

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

Name	Covered Official Position (if applicable)
<b>Burkett, Bob</b>	
<b>Carmen, David</b>	
<b>Garfinkel, Andrew</b>	
<b>Hampton, Greg</b>	<b>Dpty Asst.Secty., Office Asst. Secty. Legislation</b>
<b>Keene, David</b>	
<b>Way, Kathryn</b>	

19. Interest of each foreign entity in the specific issues listed on line 16 above

Check if None

Signature  Date 2/13/2004

Printed Name and Title Michael E. Russell - Chief Financial Officer Pa

Registrant Name: Carmen Group, Inc.

Client Name: Montefiore Medical Center

**Information Update Page - Complete ONLY where registration information has changed.**

20. Client new address

21. Client new principal place of business (if different from line 20)

City \_\_\_\_\_ State/Zip (or Country) \_\_\_\_\_

22. New general description of client's business or activities

**LOBBYIST UPDATE**

23. Name of each previously reported individual who is **no longer** expected to act as a lobbyist for the client

**Garfinkel, Andrew**

**Demske, Amy**

**Way, Kathryn**

**ISSUE UPDATE**

24. General lobbying issues previously reported that **no longer** pertain

**AFFILIATED ORGANIZATIONS**

25. Add the following affiliated organization(s)

Name	Address	Principal Place of Bu (city and state or cot


26. Name of each previously reported organization that is **no longer** affiliated with the registrant or client

**FOREIGN ENTITIES**

27. Add the following foreign entities

Name	Address	Principal Place of Business (city and state or country)	Amount of contribution for lobbying activities

28. Name of each previously reported foreign entity that **no longer** owns, or controls, or is affiliated with the registrant or affiliated organization

Signature  \_\_\_\_\_ Date 2/13/2004

Printed Name and Title Michael E. Russell - Chief Financial Officer \_\_\_\_\_ Pa