

Staff of the House of Representatives  
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  
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# LOBBYING REPORT

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

1. Registrant name			
Organization		Alston & Bird	
2. Address <input type="checkbox"/> Check if different than previously reported			
Address 1		601 Pennsylvania Ave. NW 10th Floor	
City	Washington	State	DC
Zip Code	20004-2601	Country	USA
3. Principal place of business (if different than line 2)			
City	Atlanta	State	GA
Zip Code	30309-3424	Country	USA
4a. Contact Name		b. Telephone number	c. E-mail
Prefix	Full Name		
Mr.	Jonathan M. Winer	(202) 756-3342	jwiner@alston.com
7. Client Name		5. Senate ID #	
<input type="checkbox"/> Self		1182	
ZLB Behring LLC		6. House ID #	
		31748106	

TYPE OF REPORT 8. Year 2005 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 Activity

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

<p><b>12. Lobbying Firms</b></p> <p>INCOME 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"/> ⇒ \$ <u>80,000</u></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>13. Organizations</b></p> <p>EXPENSES 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"/> ⇒ \$</p> <p><b>14. REPORTING METHOD.</b> Check box to indicate expense accounting method. See instructions for description of options</p> <p><input type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definitions only</p> <p><input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 6033(b)(8) of Internal Revenue Code</p> <p><input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162(e) of the Internal Revenue Code</p>
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Form Com

Printed Name and Title Jonathan M. Winer, Partner



Registrant Name Alston & BirdClient Name ZLB Behring LLC

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which the registrant is 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 - Medicare/Medicaid (one per page)

16. Specific lobbying issues

Add page to continue specific issues description for this issue >

Issues related to Medicare and Medicaid and Modernization Act of 2003 (Public Law 108-173)

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

House  
Senate  
CMS

18. Name of each individual who acted as a lobbyist in this issue area Add a page to continue adding lobbyists for this

First Name	Name Last Name	Suffix	Covered Official Position (if applicable)
Thomas A.	Scully		Centers for Medicaid & Medicare - Administrator
Timothy P.	Trysla		CMS - Senior Policy Advisor
Colin	Roskey		Senate Finance Committee-Health Policy Adv & Cns
Erin L.	Darlin		
Tiffany	Williams		
Marc	Scheineson		
Peter	Kazon		

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

Add a page for a different

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Registrant Name Alston & BirdClient Name ZLB Behring LLC**Information Update Page - Complete ONLY where registration information has changed.**

## 20. Client new address

Address

City

State

Zip Code

Country

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

City

State

Zip Code

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

	First Name	Last Name	Suffix		First Name	Last Name	Suffix
1	Lynn	Sykes		3			
2				4			

**ISSUE UPDATE**24. General lobbying issues that **no longer** pertain

Find the code to select below

**AFFILIATED ORGANIZATIONS**

## 25. Add the following affiliated organization(s)

Name	Address	Principal place of Business (city and state or country)
	Address	City
	C/S/Z	State
	Address	City
	C/S/Z	State

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

1		2		3	
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**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	Owners/percent client
	Street Address			
	City	State/Province		
		Country		
		City		
		State		
		Country		

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

1		3		5	
2		4		6	

Add a page for more updates

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