Clerk 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 SENATE

(3)

## LOBBYING REPORT

04 FEB -2 PM 2: 59

Lobbying Disclosure Act of 1995 (Section 5) - All F	Filers Are Required To Complete This Page (1)	
1. Registrant Name	φ. 	
Manatt, Phelps & Phillips	4.	
2. Address Check if different than previously reported		
1501 M Street, N.W., Suite 700 Washington	n, D.C. 20005	
3. Principal Place of Business (if different from line 2)		
City: same as above State/Zip	o (or Country)	
4. Contact Name Telephone	E-mail (optional) 5. Senate ID #	
Deborah Bachrach 202-463-4300	23645-17	
7. Client Name Self	6. House ID #	
Center for the Independence of the Disabled i	in New York 3020712	
9. Check if this filing amends a previously filed version of th  10. Check if this is a Termination Report   Termination  INCOME OR EXPENSES - Complete Either I	Date 12/31/03 11. No Lobbying A	
12. Lobbying Firms	13. Organizations	
INCOME relating to lobbying activities for this reporting period was:	<b>EXPENSES</b> relating to lobbying activities for this period were:	
Less than \$10,000 ⊠.	Less than \$10,000 🗌	
\$10,000 or more	\$10,000 or more	
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	g all accounting method. See instructions for description	
activities on behalf of the client).	Method A. Reporting amounts using LDA d	
	Method B. Reporting amounts under section the Internal Revenue Code	
	Method C. Reporting amounts under section Internal Revenue Code	

Signature DOWCON

Printed Name and Title

Deborah Bachrach, Partner

Filing #8e95286d-1aac-4110-9be7-c3c16160c2f2 - Page 1 of 8

Form LD-2 (Rev. 8/99) PAG

## 00000450895

Registrant Name .Manatt, Phelps & Phillips C	Client Name <u>Center for the Independence of the Disable</u>
LOBBYING ACTIVITY. Select as many code engaged in lobbying on behalf of the client during information as requested. Attach additional pages	es as necessary to reflect the general issue areas in which are the reporting period. Using a separate page for each (s) as needed.
5. General issue area code HCR	
16. Specific lobbying issues	
Proposals to reform the Medicaid program; Feder health care programs; Federal proposals to provid	ral budget proposals that impact Medicaid and other federale fiscal relief and increased Federal Medicaid funds to the
17. House(s) of Congress and Federal agencies co	ontacted
U.S. Senate	U.S. House of Representatives
Name	Covered Official Position (if applicable)
Deborah Bachrach	
Shelley B. Mayer	
Luke Rose	
19. Interest of each foreign entity in the specific	issues listed on line 16 above
Signature	ach rach Date
Printed Name and Title Deborah Bach	nrach. Partner

## 00000450896

Registrant Name .Manatt, Phelps & Phillips Client N	Iame Center for the Independence of the Disabled
LOBBYING ACTIVITY. Select as many codes as no engaged in lobbying on behalf of the client during the information as requested. Attach additional page(s) as no	ecessary to reflect the general issue areas in which reporting period. Using a separate page for each
15. General issue area code MMM (on	e per page) \$\frac{\psi_2}{\psi}\$
16. Specific lobbying issues	ල ප ජ ර
Proposals to reform the Medicaid program; Federal budghealth care programs; Federal proposals to provide fisca	get proposals that impact Medicaid and other federall I relief and increased Federal Medicaid funds to the s
17. House(s) of Congress and Federal agencies contacte	d Check if None
U.S. Senate	U.S. House of Representatives
18. Name of each individual who acted as a lobbyist in Name	this issue area  Covered Official Position (if applicable)
Deborah Bachrach	
Shelley B. Mayer	
Luke Rose	
19. Interest of each foreign entity in the specific issues	listed on line 16 above
Printed Name and Title Deborah Bachrach.	Partner

## 00000450897

20. Client new address			ල ල
		A STATE OF THE STA	
21. Client new principal place of business (if o	lifferent from line 20)		0
City		State/Zip (or Country)	<u>・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・</u>
22. New general description of client's busine	ss or activities		'www.]
LOBBYIST UPDATE	and individual who is no l	onger expected to act as a lobbyi	st for the client
23. Name of each previously rep	Luke Rose	onger expected to act as a lobbyi	or for the orient
	Dane 1000		
ISSUE UPDATE			
24. General lobbying issues prev	viously reported that no long	ger pertain	
AFFILIATED ORGAN	IIZATIONS		
25. Add the following affiliated			
Name		Address	Principal Place of Bu
			(city and state or cou
6 Name of each previously reno	orted organization that is no	longer affiliated with the registra	nt or client
o. Italic of each providedly tope			
FOREIGN ENTITIES			
27. Add the following foreign en Name	ntities Address	Principal place of business	Amount of contribution
Name	, 1001000	(city and state or country)	for lobbying activities
28. Name of each previously repartition	ported foreign entity that no	o longer owns, <u>or</u> controls, <u>or</u> i	s affiliated with the regi
	ported foreign entity that no	o longer owns, <u>or</u> controls, <u>or</u> i	s affiliated with the regi
affiliated organization	ported foreign entity that no	_ Λ	s affiliated with the regi
	1 Bachr	Date_Bachrach, Partner	s affiliated with the regi