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LOBBYING REPORT

Lobby Disclosure Act of 1995 (Section 5) – All Filers Are Required To Complete This Page

1. Registrant Name Shaw Pittman			
2. Address <input type="checkbox"/> Check if different than previously reported 2300 N Street, NW Washington, DC 20037			
3. Principal Place of Business (if different from line 2) City: _____ State/Zip (or Country) _____			
4. Contact Name	Telephone	E-mail (optional)	5. Senate ID
Claudia A. Hrvatin	202.663.8245	claudia.hrvatin@shawpittman.com	
7. Client Name <input type="checkbox"/> Self			6. House ID
Medicare Cost Contractors Alliance			32369054

TYPE OF REPORT 8. Year 2001 Midyear (January 1 – June 30) OR Year End (July 1 – December)

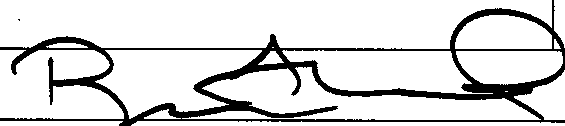
9. Check if this filing amends a previously filed version of this report

10. Check if this is a Termination Report → Termination Date _____

11. No Lobbying Acti

INCOME OR EXPENSES – Complete Either Line 12 OR Line 13	
<p align="center">12. Lobbying Firms</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>\$ 40,000</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 align="center">13. Organizations</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"/> ⇒ \$ _____ Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indi expense accounting method. See instructions for description of options.</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definitions only.</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 1 of the Internal Revenue Code</p>

Signature



Date

08/08/2001

Printed Name and Title

Bruce M. Fried, Partner



Registrant Name Shaw Pittman Client Name Medicare Cost Contractors Allian

LOBBY 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. Attached additional pages(s) as needed.

15. General issue area code HCR (one per page)

16. Specific lobbying issues

Medicare reform issues relevant to cost contractors.

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

U.S. House of Representatives, U.S. Senate

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

Name	Covered Official Position (if applicable)
Bruce M. Fried	
Thomas J. Spulak	
Andrew L. Woods	
Mark Smith	
Sylvia Yu	

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

Signature  Date 08/08/2001

Printed Name and Title Bruce M. Fried, Partner

