

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
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SECRETARY OF THE SENATE
03 MAR 25 PM 1

LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration

1. Effective Date of Registration MARCH 1

2. House Identification Number _____ Senate Identification Number _____

REGISTRANT

3. Registrant name Ricchetti Inc.

Address 1001 G Street NW Suite 700 East

City WASHINGTON State DC Zip 20001

4. Principal place of business (if different from line 3)
City _____ State/Zip (or Country) _____

5. Telephone number and contact name
(202) 879-9367 Contact James Heinbech E-mail (optional) _____

6. General description of registrant's business or activities
Government Affairs & Political Consulting

CLIENT A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should labeled "Self" and proceed to line 10. Self

7. Client name Health Insurance Association of America (HIAA)

Address 1201 F Street Suite 500

City Washington State DC Zip 20004

8. Principal place of business (if different from line 7)
City _____ State/Zip (or Country) _____

9. General description of client's business or activities
Health insurance association

LOBBYISTS

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any this section has served as a "covered executive branch official" or "covered legislative branch official" within the past 12 months, acting as a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

Name	Covered Official Position (if applicable)
<u>Steve Ricchetti</u>	
<u>Jeff Ricchetti</u>	
<u>Lisa Kavoutapes</u>	

James Heimbach

Form LD-1 (Rev. 06/98)



Registrant Name Ricchetti Inc. Client Name HIAA

LOBBYING ISSUES

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LL

HCR MMM

12. Specific lobbying issues (current and anticipated)

General health care and medicare - related legislation

AFFILIATED ORGANIZATIONS

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the client during a semiannual period and in whole or in major part plans, supervises or controls the registrant's lobbying activities?

No ⇒ Go to line 14.

Yes ↓ Complete the rest of this section for each entity matching the criteria above, then proceed to line 14.

Name	Address	Principal Place of Business (city and state or country)

FOREIGN ENTITIES

14. Is there any foreign entity that:

- a) holds at least 20% equitable ownership in the client or any organization identified on line 13;
- b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or controls the lobbying activities of the client or any organization identified on line 13; **OR**
- c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in the lobbying activity?

No ⇒ Sign and date the registration.

Yes ↓ Complete the rest of this section for each entity matching the criteria above, then sign and date the registration.

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

Signature *James J. ...* Date 3/21/03

Printed Name and Title James T Heinbech, Vice President

Form LD-1 (Rev. 06/98)