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LOBBYING REPORT

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

1. Registrant name Vinson & Elkins LLP			
2. Address 1455 Pennsylvania Avenue, N.W., Suite 800, Washington, D.C. 20004-1008			
3. Principal place of business (if different from line 2) City _____ State/Zip (or Country) _____			
4. Contact Name Christine L. Vaughn	Telephone (202) 639-6500	E-mail (optional)	5. Senate ID 40112-
7. Client Name <input type="checkbox"/> Self University of Iowa Hospitals & Clinics			6. House ID 31414-

TYPE OF REPORT 8. Year 2003 Midyear (January 1–June 30) **OR** Year End (July 1–Decen

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
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating to lobbying activities for this reporting period were:
Less than \$10,000 <input checked="" type="checkbox"/>	Less than \$10,000 <input type="checkbox"/>
\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Income (nearest \$20,000)	\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (nearest \$20,000)
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).	14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description of op
	<input type="checkbox"/> Method A. Reporting amounts using LDA defini
	<input type="checkbox"/> Method B. Reporting amounts under section 603 Internal Revenue Code
	<input type="checkbox"/> Method C. Reporting amounts under section 162 Internal Revenue Code

Signature _____ Date _____

Printed Name and Title _____

Form ID-2 (Rev 6/98)

Form LD-2 (Rev 6/98)