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# LOBBYING REPORT

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

1. Registrant Name Mayer, Brown, Rowe & Maw LLP			
2. Address <input type="checkbox"/> Check if different than previously reported 1909 K Street, N.W., Washington, D.C. 20006			
3. Principal Place of Business (if different from line 2) City: _____ State/Zip (or Country) _____			
4. Contact Name Carolyn P. Osolinik	202-263-3000	Telephone	E-mail (optional)
7. Client Name <input type="checkbox"/> Self University of Rochester Medical Center			5. Senate ID # 24123-1510
			8. House ID # 31349-111

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

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**  
INCOME relating to lobbying activities for this reporting period was:

Less than \$10,000   
\$10,000 or more  \$ 60,000  
Income (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).

**13. Organizations**  
EXPENSES relating to lobbying activities for this reporting period were:

Less than \$10,000   
\$10,000 or more  \_\_\_\_\_  
Expenses (nearest \$20,000)

**14. REPORTING METHOD.** Check box to indicate accounting method. See instructions for description

- Method A.** Reporting amounts using LDA definition  
 **Method B.** Reporting amounts under section 170(e)(2)(B) Internal Revenue Code  
 **Method C.** Reporting amounts under section 170(e)(2)(C) Internal Revenue Code

Signature Carolyn P. Osolinik

Printed Name and Title Carolyn P. Osolinik, Partner

20606602.1 080803 1448E 89847263

Registrant Name Mayer, Brown, Rowe & Maw LLP Client Name University of Rochester Medical Center

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which the registrant is lobbying on behalf of the client during the reporting period. Using a separate page for each code, provide information. Attach additional page(s) as needed.

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

16. Specific lobbying issues  
Graduate medical education

17. House(s) of Congress and Federal agencies contacted  Check if None  
U.S. Senate  
U. S. House of Representatives  
Department of Justice  
Department of Health and Human Services  
Executive Office of the President

Name	Covered Office Position (if applicable)
Carolyn P. Osolinik	
Robert E. Bloch	
Catherine A. Stevens	

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

Signature *Carolyn P. Osolinik* Date August 8, 2003  
Printed Name and Title Carolyn P. Osolinik, Partner

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Registrant Name Mayer, Brown, Rowe & Maw LLP Client Name University of Rochester Medical Center

**Information Update Page — Complete ONLY where registration information has changed.**

20. Client new address

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

City State/Zip (or 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

Richard S. Williamson

**ISSUE UPDATE**

24. General lobbying issues previously reported that **no longer** pertain

**AFFILIATED ORGANIZATIONS**

25. Add the following affiliated organization(s)

Name	Address	Principal Place of E (city and state or c

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

**FOREIGN ENTITIES**

27. Add the following foreign entities

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

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

Signature

*Carolyn P. Osolinik*

Date August 8, 2003

Printed Name and Title Carolyn P. Osolinik, Partner

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