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04 FEB -2 PM '04

LOBBYING REPORT

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

1. Registrant Name Northwestern Memorial Hospital			
2. Address <input type="checkbox"/> Check if different than previously reported 240 East Ontario Street - Suite 500			
3. Principal Place of Business (If different from line 2) City: Chicago State/Zip (or Country) IL 60611			
4. Contact Name Robert J. Christie	Telephone 312-926-7527	E-mail (optional) rchristi@nmh.org	5. Senate 295
7. Client Name <input checked="" type="checkbox"/> Self			6. Hours 312

TYPE OF REPORT 8. Year 2002 Midyear (January 1-June 30) OR Year End (July)

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 Lot

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p>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 type="checkbox"/> ⇨ \$ _____ <small>Income (nearest \$20,000)</small></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>13. Organizations</p> <p>EXPENSES relating to lobbying activities for the period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ <u>200,000.00</u> <small>Expenses (nearest</small></p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for descriptive</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA de</p> <p><input checked="" type="checkbox"/> Method B. Reporting amounts under section Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section Internal Revenue Code</p>
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Signature Robert J. Christie

Printed Name and Title Robert J. Christie, Vice President, Government and Legislative

LD-2 (REV. 6/98)

Registrant Name Northwestern Memorial Hospital Client Name _____

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

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

16. Specific lobbying issues

H.CON.RES.353, Establishing the congressional budget for the United States (for fiscal year 2003 and setting forth appropriate budgetary levels for each years 2004 through 2007,
H.R.3448, Public Health Security and Bioterrorism Response Act of 2001
H.R.4954, Medicare Modernization and Prescription Drug Act of 2002,
S.CON.RES.100, An original concurrent resolution setting forth the congressi for the United States Government for fiscal year 2003 and setting forth the appropriate budgetary levels for each of the fiscal years 2004 through 2012.

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

Department of Health and Human Services
Executive Office of the President
House of Representatives
Senate

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

Name	Covered Official Position (if applicable)
Robert J. Christie	

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

Signature _____ Date 2/9/02

Printed Name and Title Robert J. Christie

Registrant Name Northwester Memorial Hospital Client Name _____

0
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LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

H.CON.RES.353, Establishing the congressional budget for the United States G fiscal year 2003 and setting forth appropriate budgetary levels for each fi 2004 through 2007.

H.R.3448, Public Health Security and Bioterrorism Response Act of 2001,

H.R.4954, Medicare Modernization and Prescription Drug Act of 2002,

S.CON.RES.100, An original concurrent resolution setting forth the congressio the United States Government for fiscal year 2003 and setting forth the appro budgetary levels for each of the fiscal years 2004 through 2012,

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

Department of Health and Human Services
Executive Office of the President
House of Representatives
Senate

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

Name	Covered Official Position (if applicable)
Robert J. Chrisite	

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

Signature _____ Date 8/9/02

Printed Name and Title Robert J. Christie

Registrant Name Northwestern Memorial Hospital Client Name _____

00000450316

Information Update Page - Complete ONLY where registration information has changed.

20. Client new address
N/A

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
N/A

LOBBYIST UPDATE

23. Name of each previously reported individual who is no longer expected to act as a lobbyist for the client
N/A

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 B (city and state or c

26. Name of each previously reported organization that is no longer affiliated with the registrant or client
N/A

FOREIGN ENTITIES

27. Add the following foreign entities

Name	Address	Principal place of business (city and state or country)	Amount of contribution 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 _____ Date 8/9/02

