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## LOBBYING REPORT

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

1. Registrant Name MADISON ASSOCIATES LLC			
2. Address <input type="checkbox"/> Check if different than previously reported 1875 EYE STREET NW, 12TH FLOOR			
3. Principal Place of Business (if different from line 2) City: WASHINGTON DC State/Zip (or Country) 20006			
4. Contact Name J. MICHAEL HALL	Telephone (202) 452-5700	E-mail (optional) jday@madisonassoc.com	5. Senate ID #
7. Client Name <input type="checkbox"/> Self AMERICAN OCCUPATIONAL THERAPY ASSOCIATION			6. House ID #

**TYPE OF REPORT** 8. Year \_\_\_\_\_ Midyear (January 1-June 30)  OR Year End (July 1-December 31)

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

<p align="center"><b>12. Lobbying Firms</b></p> <p><b>INCOME</b> 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>20,000.00</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"><b>13. Organizations</b></p> <p><b>EXPENSES</b> 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><b>14. REPORTING METHOD.</b> Check box to indicate accounting method. See instructions for description of</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 603 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162 Internal Revenue Code</p>
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Signature \_\_\_\_\_



Registrant Name MADISON ASSOCIATES LLC Client Name AMERICAN OCCUPATIONAL THERAPY ASSOCIATION

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

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

16. Specific lobbying issues

POLICY & APPROPRIATIONS MATTERS IN SUPPORT OF THE AMERICAN OCCUPATIONAL THERAPY ASSOCIATION'S PROGRAM INTERESTS.

17. House(s) of Congress and Federal agencies contacted

Check if None

SENATE, HOUSE OF REPRESENTATIVES

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

Name	Covered Official Position (if applicable)
HALL, J. MICHAEL	N/A
HAYWOOD, ALYSON	N/A

19. Interest of each foreign entity in the specific issues listed on line 16 above

Check if None

Signature J. Michael Hall Date 8/14/2008

Printed Name and Title J. MICHAEL HALL, Principal

