

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

SECRETARY OF THE SENATE
07 MAY 18 2007
LOBBYING REPC

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

1. Registrant Name <input type="checkbox"/> Organization <input checked="" type="checkbox"/> Individual	
Prefix <u>Mr.</u> First <u>Bill</u> Last <u>Pewitt</u>	
2. Address <input type="checkbox"/> Check if different than previously reported	
Address1 <u>1015 Gaston Avenue</u> Address2 _____	
City <u>Austin</u> State <u>TX</u> Zip Code <u>78703</u>	
3. Principal place of business (if different than line 2)	
City <u>Same as above</u> State _____ Zip Code _____	
4a. Contact Name <u>same as above</u>	b. Telephone Number <input type="checkbox"/> International Number
7. Client Name <input type="checkbox"/> Self <u>Texas Association for Home Care</u>	5. Sen <u>3131</u> 6. Ho <u>322</u>

TYPE OF REPORT 8. Year 2006 Midyear (January 1-June 30) ☒ Year End (July 1-Dec)

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 Act

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p align="center">12. Lobbying</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p><u>Less than \$10,000</u> <input checked="" type="checkbox"/></p> <p><u>\$10,000 or more</u> <input type="checkbox"/> \$ _____</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">13. Organizations</p> <p>EXPENSE relating to lobbying activities for this were:</p> <p><u>Less than \$10,000</u> <input type="checkbox"/></p> <p><u>\$10,000 or more</u> <input type="checkbox"/> \$ _____</p> <p>14. REPORTING Check box to indicate accounting method. See instructions for descriptive</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 Revenue Code</p>
---	---

Signature

Bill Pewitt

Date 5

Printed Name and Title Bill Pewitt

0000061515

Registrant

Pewitt

Client Name

Texas Association for Home Care

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

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

16. Specific lobbying issues

Medicare funding; home health care

17. House(s) of Congress and Federal agencies ☐ Check if None ☒ House ☒ Senate

US House of Representatives

US Senate

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

Name			Covered Official Position (if applicable)
First	Last	Suffix	
Bill	Pewitt		

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



v5.0.0]