

SECRETARY OF THE

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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
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LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration 1. Effective Date of Registration April 2, 2004

2. House Identification Number _____ Senate Identification Number _____

REGISTRANT

3. Registrant name Mayer, Brown, Rowe & Maw

Address 1909 K Street, N.W.

City Washington State DC Zip 20006

4. Principal place of business (if different from line 3)
City _____ State/Zip (or Country) _____

5. Telephone number and contact name
202-263-3000 Carolyn P. Osolinik E-mail (optional) _____

6. General description of registrant's business or activities
Law firm

CLIENT *A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should be labeled "Self" and proceed to line 10.* Self

7. Client Name VHA, Inc.

Address 220 East Las Colinas Boulevard

City Irving State TX Zip 75039

8. Principal place of business (if different from line 7)
City same State/Zip (or Country) _____

9. General description of client's business or activities
Health Care Cooperative

LOBBYISTS

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any person listed in this section is a "covered executive branch official" or "covered legislative branch official" within two years of first acting as a lobbyist for the client, indicate the "covered executive branch official" and/or legislative position(s) in which the person served.

Name	Covered Official Position (if applicable)
Carolyn P. Osolinik	
David McIntosh	

Registrant Name Mayer, Brown, Rowe & Maw

Client Name VHA, Inc.

LOBBYING ISSUES

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1,

HCR _____

12. Specific lobbying issues (current and anticipated)

Medicare reform

AFFILIATED ORGANIZATIONS

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of a semiannual period and in whole or in major part plans, supervises or controls the registrant's lobbying activities?

No ⇨ Go to line 14.

Yes ↓ Complete the rest of this section for each entity matching the criteria above, then proceed to line 14.

Name	Address	Principal Place of (city and state or country)

FOREIGN ENTITIES

14. Is there any foreign entity that:

- a) holds at least 20% equitable ownership in the client or any organization identified on line 13; **OR**
- b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or subsidizes activities of the client or any organization identified on line 13; **OR**
- c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in the outcome of the lobbying activity?

No ⇨ Sign and date the registration.

Yes ↓ Complete the rest of this section for each entity matching the criteria above, then sign and date the registration.

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

Signature Carolyn P. Osolinik

Date August 12, 2004

Printed Name and Title Carolyn P. Osolinik, Partner

