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SECRETARY OF THE SENATE

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CERTIFIED MAIL, RETURN RECEIPT REQUESTED

February 7, 2002

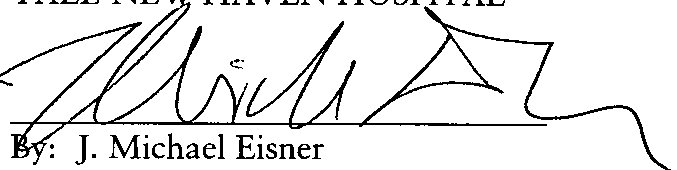
Secretary of the Senate  
Office of Public Records  
232 Hart Senate Office Building  
Washington, DC 20510

Dear Sir or Madam:

Enclosed is the report of Yale-New Haven Hospital for the reporting period Jul 1, 2001 through December 31, 2001, signed by Kyle Ballou, Administrative Director of Community and Government Relations.

Please call me at 203-498-4317 if there are any questions.

Sincerely yours,  
YALE-NEW HAVEN HOSPITAL

  
By: J. Michael Eisner

CC: Ms. Kyle Ballou

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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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SECRETARY  
02 MAY -

# LOBBYING REPORT

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

1. Registrant Name <u>Yale-New Haven Hospital</u>			
2. Address		<input type="checkbox"/> Check if different than previously reported	
<u>20 York Street, New Haven, CT 06504</u>			
3. Principal Place of Business (if different from line 2)			
City:		State/Zip (or Country)	
4. Contact Name	Telephone	E-mail (optional)	5. Senate
<u>Kyle Ballou</u>	<u>203-688-2503</u>		
7. Client Name	<input checked="" type="checkbox"/> Self		6. House 1

**TYPE OF REPORT** 8. Year 2001 Midyear (January 1-June 30)  OR Year End (July 1

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 Lob

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13	
<p><b>12. Lobbying Firms</b></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><b>13. Organizations</b></p> <p>EXPENSES relating to lobbying activities for the period were:</p> <p>Less than \$10,000 <input checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ _____  <small>Expenses (nearest</small></p> <p><b>14. REPORTING METHOD.</b> Check box to indicate accounting method. See instructions for descriptive</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA d</p> <p><input 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>

Signature Kyle J. Ballou



Registrant Name Yale-New Haven Hospital Client Name "self"

**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 Relief from the Medicare reimbursement cuts resulti  
Balanced Budget Act of 1997.

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

Meeting with Connecticut Congressional delegation (House and Senate)

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

Name	Covered Official Position (if applicable)
<u>Kyle Ballou</u>	

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

Signature Kyle L. Ballou Date 2/6/02

