

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  
05 JUL 1

# LOBBYING REPORT

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

1. Registrant name			
Organization	LANDRIEU		
2. Address <input type="checkbox"/> Check if different than previously reported			
2400 ST. CHARLES AVENUE			
City	NEW ORLEANS	State	LA Zip Code 70130 Country U
3. Principal place of business (if different than line 2)			
City		State	Zip Code Country
4a. Contact Name		b. Telephone number	c. E-mail
Prefix	Full Name		
Mrs.	phyllis landrieu	504-523-1193	phyllis.landrieu@tenethealth.com
7. Client Name <input type="checkbox"/> Self			5. Senate ID #
TENET HEALTHCARE CORPORATION			22132-01
			6. House ID #
			322386

TYPE OF REPORT 8. Year 2004 Midyear (January 1-June 30)  OR Year End (July 1-December)

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"><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 checked="" type="checkbox"/> ⇒ \$ 50,000</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>EXPENSES 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"/> ⇒ \$</p> <p><b>14. REPORTING METHOD.</b> Check box to indicate accounting method. See instructions for description of</p> <p><input checked="" type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b) Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) Revenue Code</p>
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Form

Printed Name and Title PHYLLIS LANDRIEU, GOVERNMENT AFFAIRS CONSULTANT

*Phyllis Landrieu* 6/28/04

*Urgent*

Registrant Name LANDRIEU

Client Name TENET HEALTHCARE CORPOR

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

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

16. Specific lobbying issues

*Add page to continue specific issues description for this issue*

SPECIALTY HOSPITAL MORATORIUM  
MEDICARE AND MEDICAID FUNDING  
PRESCRIPTION DRUG BILL EFFECT ON HOSPITALS

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

SPECIALTY HOSPITAL MORATORIUM  
MEDICARE AND MEDICAID FUNDING  
PRESCRIPTION DRUG BILL EFFECT ON HOSPITALS

18. Name of each individual who acted as a lobbyist in this issue area *Add a page to continue adding lobbyists to*

First Name	Name Last Name	Suffix	Covered Official Position (if applicable)
PHYLLIS	LANDRIEU	MRS.	

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

*Add a page for a dif*

Printed Name and Title PHYLLIS LANDRIEU, GOVERNMENT AFFAIRS CONSULTANT



Registrant Name LANDRIEU

Client Name TENET HEALTHCARE CORPOR

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

**20. Client new address**

Address  
City State Zip Code Country

**21. Client new principal place of business (if different than line 20)**

City State Zip Code Country

**22. New general description of client's business or activities**

**LOBBYIST UPDATE**

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

First Name	Last Name	Suffix	First Name	Last Name
1			3	
2			4	

**ISSUE UPDATE**

**24. General lobbying issues that no longer pertain**

Find the code to select below.

**AFFILIATED ORGANIZATIONS**

**25. Add the following affiliated organization(s)**

Name	Address	Principal place of Business (city and state or country)
	Address C/S/Z	City State Country
	Address C/S/Z	City State

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

1	2	3
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**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	Other
	Street Address City State/Province Country	City State Country		

**28. Name of each previously reported foreign entity that no longer owns, or controls, or is affiliated with the registrant or affiliated organization**

1	3	5
2	4	6

Add a page for more

Printed Name and Title PHYLLIS LANDRIEU, GOVERNMENT AFFAIRS CONSULTANT

