

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

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LOBBYING REPORT

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

1. Registrant Name <i>Private Practice Section of the American Physical Therapy Association</i>			
2. Address <input type="checkbox"/> Check if different than previously reported <i>1710 Rhode Island Avenue</i>			
3. Principal Place of Business (if different from line 2) City: <i>Washington, DC</i> State/Zip (or Country) <i>DC/20036</i>			
4. Contact Name <i>Kathlene Dech</i>	Telephone <i>202-457-1115</i>	E-mail (optional) <i>Kdech@ppsapta.org</i>	5. Senate ID # <i>6004-</i>
7. Client Name <input checked="" type="checkbox"/> Self			6. House ID # <i>3535</i>

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

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms	13. Organizations
INCOME relating to lobbying activities for this reporting period was: Less than \$10,000 <input type="checkbox"/> \$10,000 or more <input type="checkbox"/> ⇨ \$ _____ Income (nearest \$20,000) 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).	EXPENSES relating to lobbying activities for this reporting period were: Less than \$10,000 <input checked="" type="checkbox"/> \$10,000 or more <input type="checkbox"/> ⇨ \$ _____ Expenses (nearest \$20,000) 14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description of <input checked="" type="checkbox"/> Method A. Reporting amounts using LDA definit <input type="checkbox"/> Method B. Reporting amounts under section 603 Internal Revenue Code <input type="checkbox"/> Method C. Reporting amounts under section 162 Internal Revenue Code

Signature

Printed Name and Title

Kathlene M. Dech, Vice President



Registrant Name _____ Client Name _____

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 HCER (one per page)

16. Specific lobbying issues

Patients' Bill of Rights, Senate version S (1052) and House version relating to the liability provisions. MERFA (HR 868) relating to Medicare regulatory reform in the area of provider compliance. Medicare Regulatory and Contracting Act of 2001 (HR 2768) in the

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

Check if None

Senate, House of Representative

Medicare reform

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

Name	Covered Official Position (if applicable)
<i>Kathlene Dech</i>	
<i>John Hendrickson</i>	
<i>Joanne Dunne</i>	

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

Check if None

Signature *Kathlene Dech*

Date _____

Printed Name and Title _____



Registrant Name _____ Client Name _____

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 information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

MERFA (HR 868) relating to provisions which allow business private practitioners to become more easily complex CMS regulations. Legislation which affects small businesses, relating to health care issues

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

House of Representatives, Senate

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

Name	Covered Official Position (if applicable)
<i>Kathlene Dech</i>	
<i>John Hendrickson</i>	
<i>Janne Dume</i>	

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

Signature *[Signature]* Date _____

Printed Name and Title _____



Registrant Name _____ Client Name _____

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

20. Client new address

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

City

State/Zip (or 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

Lisa Marie Brody

ISSUE UPDATE

24. General lobbying issues previously reported that no longer pertain

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal Place of Bus (city and state or cou
<i>None</i>		

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

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

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

Signature *Kenn Dech*

Date _____

