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LOBBYING REPORT

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

1. Registrant name Vinson & Elkins LLP			
2. Address 1455 Pennsylvania Avenue, N.W., Suite 800, Washington, D.C. 20004-1008			
3. Principal place of business (if different from line 2) City _____ State/Zip (or Country) _____			
4. Contact Name Christine L. Vaughn	Telephone (202) 639-6500	E-mail (optional)	5. Senate I 40112
7. Client Name <input type="checkbox"/> Self National Association of Children's Hospitals			6. House I 31414

TYPE OF REPORT 8. Year 2002 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 Lobbyin

INCOME OR EXPENSES – Complete Either Line 12 **OR** Line 13

<p style="text-align: center;">12. Lobbying Firms</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ _____ Income (nearest \$20,000)</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 style="text-align: center;">13. Organizations</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"/> ⇨ \$ _____ Expenses (nearest \$</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description of</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA de</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 162(e) of the Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code</p>
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Signature _____ Date **February 13, 20**

Printed Name and Title **Christine L. Vaughn, Partner**

Form LD-2 (Rev. 6/98)

Registrant Name Vinson & Elkins LLP Client Name National Association of Children'

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

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

16. Specific lobbying

Reimbursement to children's hospitals for graduate medical education costs.

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

U.S. Senate

U.S. House of Representatives

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

Name	Covered Official Position (if applicable)
Dennis M. Barry	
Larry A. Oday	
Andrew D. Ruskin	

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

Signature _____ Date February 13, 20

Printed Name and Title Christine L. Vaughn, Partner

Form I D-2 (Rev. 6/98)

Form LD-2 (Rev 6/98)