

**PATTON BOGGS LLP**  
ATTORNEYS AT LAW

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SECRETARY OF THE SENATE Washington, DC 20037-1350  
202-457-6000  
99 APR -9 AM 8:28  
Facsimile 202-457-0315

H.D.

April 06, 1999

James B. Christian  
202-457-6484  
jchristian@pattonboggs.com


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

Dear Mr. Sisco:

Enclosed please find the lobby registration for Alliance of Catholic Health Care Systems.

Please feel free to contact me if you have any questions.

Sincerely,



James B. Christian

JBC/dg

BALTIMORE • DALLAS • DENVER • GREENSBORO • RALEIGH • SEATTLE • WASHINGTON, DC

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 OF THE SENATE

99 APR -9 AM 8:28

H. D.

# LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration  I. Effective Date of Registration March 1, 1999  
 2. House Identification Number \_\_\_\_\_ Senate Identification Number \_\_\_\_\_

## REGISTRANT

3. Registrant Name Patton Boggs LLP  
 Address 2550 M Street, N.W.  
 City Washington, State D.C. Zip 20037  
 4. Principal place of business (if different from line 3)  
 City \_\_\_\_\_ State/Zip (or Country) \_\_\_\_\_  
 5. Telephone number and contact name  
 (202) 457-6484 Contact: James B. Christian Email: jchristian@pattonboggs.com  
 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 check the box labeled "Self" and proceed to line 10.*  Self

7. Client Name Alliance of Catholic Health Care Systems  
 Address 1201 K Street  
 City Sacramento State CA Zip 95814  
 8. Principal place of business (if different from line 7)  
 City \_\_\_\_\_ State/Zip (or Country) \_\_\_\_\_  
 9. General description of client's business or activities Health Care Provider

## 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 has served as a "covered executive branch official" or "covered legislative branch official" within two years of first acting as a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

Name	Covered Official Position (if applicable)
<u>Willis D. Gradison, Jr.</u>	

Registrant Name Patton Boggs LLP

Client Name Alliance of Catholic Health Care Systems

**LOBBYING ISSUES**

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

MMM

12. Specific lobbying issues (current and anticipated)

Medicare reimbursement

**AFFILIATED ORGANIZATIONS**

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

No  $\Rightarrow$  Go to Line 14

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

Name	Address	Principal Place of Business (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  $\Rightarrow$  Sign and date the registration.

Yes  $\Downarrow$  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	Ownership percentage in client

Signature

*James B. Christian, Jr.*

Date

4/7/99

Printed Name and Title

James B. Christian, Jr. Partner