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LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration

1. Effective Date of Registration September 18, 2008

2. House Identification Number _____

Senate Identification Number _____

REGISTRANT

3. Registrant name Akin, Gump, Strauss, Hauer & Feld, L.L.P.
 Address 1333 New Hampshire Avenue, NW
 City Washington State DC Zip 20004
4. Principal place of business (if different from line 3)
 City _____ State/Zip (or Country) _____
5. Telephone number and contact name
 (202) 887-4000 Contact Jorge Lopez, Jr. E-mail (optional) _____
6. General description of registrant's business or activities
A law firm

CLIENT

A lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should check "Self" and proceed to line 10. Self

7. Client name UPMC Health System, Inc.
 Address 200 Lothrop Street – Forbes Tower
 City Pittsburgh State PA Zip 15201
8. Principal place of business (if different from line 7)
 City _____ State/Zip (or Country) _____
9. General description of client's business or activities
Hospital system

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 in this section has served as a "covered executive branch official" or "covered legislative branch official" within two years of 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>Jorge Lopez, Jr.</u>	
<u>Barney J. Skladany</u>	

Registrant Name Akin, Gump, Strauss, Hauer & Feld, L.L.P. Client Name UPMC Health System, Inc.

LOBBYING ISSUES

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

MMM

12. Specific lobbying issues (current and anticipated)

Medicare payment for hospitals

AFFILIATED ORGANIZATIONS

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

No ⇒ Go to line 14.

Yes ↓ 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 in any organization identified online 13; or
 b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or su
 the 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
 of the lobbying activity?

No ⇒ Sign and date the registration.

Yes ↓ Complete the rest of this section for each matching the criteria above, then sign an registration.

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities

Signature 

Date November 7, 2002

Printed Name and Title Jorge Lopez, Jr.

