

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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LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Has this registrant previously registered with the Office of the Clerk? Yes No

1. Effective Date of Registration 01/28/2

2. House Identification Number _____ Senate Identification Number _____

REGISTRANT

3. Registrant name Organization Bracewell & Patterson, L.L.P.

Address 2000 K Street, NW Suite 500

City Washington State DC Zip 20006

4. Principal place of business (if different than line 3)

City _____ State _____ Zip _____

5. Telephone number and contact name Prefix Full Name

202-828-5841 Contact Mr. Michael Pate E-mail michael.pate@bracepatt.cc

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 Willkie Farr & Gallagher, L.L.P.

Address 1875 K Street, NW

City Washington State DC Zip 20006 Country _____

8. Principal place of business (if different than line 7)

City _____ State _____ Zip _____ Country _____

9. General description of client's business or activities
law firm

LOBBYISTS

Go to page 3 to add in

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

Name			Covered Official Position (if applicable)
First	Last	Suffix	
Edward	Krenik		Associate Admin. for Congressional & Inter-governmental Relations, EPA (2001-2003)
Scott H.	Segal		
Joshua C.	Zive		

Michael J. Ad

Registrant Name Bracewell & Patterson, L.L.P. Client Name Willkie Farr & Gallagher, L.L.P.

LOBBYING ISSUES Find the code to select below. *Go to page 3 to add more lobby*

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

HOM TOR _____

12. Specific lobbying issues (current and anticipated)

liability issues related to silicosis

AFFILIATED ORGANIZATIONS

Go to page 3 to add more org

13. Is there an 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 ⇒ Go to line 14.

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

Name	Address	Principal place of Busin (city and state or cour
Coalition for Breathing Safety	c/o Law Offices of James Hornstein 1011 Jefferson Blvd Culver City CA 90232	Culver City CA

FOREIGN ENTITIES

Go to page 3 to add more for

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 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 lobbying activity?

No ⇒ Sign and date the registration.

Yes ⇒ Complete the rest of this section for each en matching the criteria above, then sign and d registration.

Name	Address			Principal place of business (city and state or country)	Amount of contribution for lobbying activities
	Street Address City	State/Province	Country		

Form C

Printed Name and Title _____

Registrant Name Bracewell & Patterson, L.L.P.

Client Name Willkie Farr & Gallagher, L.L.P.

ADDITIONAL LOBBYISTS

Return to page 2 to finish

10 Supplemental. List any additional lobbyists for this client not listed on page 1, number 10.

First	Name		Covered Official Position (if applicable)
	Last	Suffix	

ADDITIONAL LOBBYING ISSUES

Return to page 2 to finish

11 Supplemental. General lobbying issue areas. Enter any additional codes for issues not listed on page 2, number 11.

Find the code to select below.

AFFILIATED ORGANIZATIONS

Return to page 2 to finish

13 Supplemental. List any other affiliated organization that meets the criteria specified and is not listed on page 2, number 13.

Name	Address	Principal place of business (city and state or country)

ADDITIONAL FOREIGN ENTITIES

Return to page 2 to finish

14 Supplemental. List any other foreign entity that meets the criteria specified and is not listed on page 2, number 14.

Name	Address			Principal place of business (city and state or country)	Amount of contribution for lobbying activities
	Street Address City	State/Province	Country		

Add an additional supplementary information

Printed Name and Title _____

