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## LOBBYING REPORT

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

1. Registrant Name <b>Patton Boggs LLP</b>	
2. Address <input type="checkbox"/> Check if different than previously report <b>2550 M Street, NW Washington, DC 20037</b>	
3. Principal Place of Business (if different from line 2) City: State/Zip (or Country)	
4. Contact Name Telephone E-mail (optional) <b>James B. Christian 202-457-6484</b>	5. Senate ID # <b>30906-5913</b>
7. Client Name <input type="checkbox"/> Self <b>Alliance for Quality Nursing Home Care</b>	6. House ID # <b>31917474</b>

TYPE OF REPORT 8. Year 2002 Midyear (January 1-June 30)  OR Year End (July 1-December 31)

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 Activity

### 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:	EXPENSES relating to lobbying activities for this period were:
Less than \$10,000 <input type="checkbox"/>	Less than \$10,000 <input type="checkbox"/>
\$10,000 or more <input checked="" type="checkbox"/> ⇒ <b>\$220,000</b> Income (nearest \$20,000)	\$10,000 or more ⇒ \$ _____ Expenses (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).	14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for details of options.  <input type="checkbox"/> Method A. Reporting amounts using LDA definition <input type="checkbox"/> Method B. Reporting amounts under section 6033 of the Internal Revenue Code <input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code

Signature \_\_\_\_\_

Printed Name and Title **James B. Christian, Partner**

<http://ntdcintranet/DCFirm/lobby/LobbDisc.nsf/e178c1a2657df0d88025698f00682dc1/8942...>

Registrant Name **Patton Boggs LLP**Client Name **Alliance for Quality Nursing Home C**

**LOBBYING ACTIVITY.** Select as many 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, provide information requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

**Medicare payments to nursing homes****S. 2490, H.R. 4954, Medicare Skilled Nursing Beneficiary Protection Act;**

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

**US House of Representatives****US Senate**

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

Name	Covered Official Position (if applicable)	
Thomas Boggs	None	
John Jonas	None	
Willis Gradison	None	
Martha Kendrick	None	
Andrew Rosenberg	None	
Kathleen Means	Chief Health Care Analyst U.S. Senate Finance Committee	

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

Signature

Date

Printed Name and Title **James B. Christian, Partner**

<http://ntdcintranet/DCFirm/lobby/LobbDisc.nsf/e178c1a2657df0d88025698f00682dc1/8b31..>

Registrant Name **Patton Boggs LLP**

Client Name **Alliance for Quality Nursing Home C**

**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

**Willis Gradison**

**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 Business (city and state or country)

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 or affiliated organization

Signature

Date

Printed Name and Title **James B. Christian, Partner**

<http://ntdcintranet/DCFirm/lobby/LobbDisc.nsf/e178c1a2657df0d88025698f00682dc1/294...>