

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

SECRETARY OF THE SENATE

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LOBBYING REPORT

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

1. Registrant Name PRESTON GATES ELLIS & ROUVELAS MEEDS LLP			
2. Registrant Address <input type="checkbox"/> Check if different than previously reported Address 1735 NEW YORK AVE, NW SUITE 500 City WASHINGTON State/Zip (or Country) DC 20006			
3. Principal Place of Business (if different from line 2) City _____ State/Zip (or Country) _____			
4. Contact Name TERRI PAULK	Telephone 202 628 1700	E-mail (optional) TERRIP@PRESTONGATES.COM	5. Senate ID # 32098-2334
7. Client Name <input type="checkbox"/> Self HOME CARE ASSOCIATION OF N.Y. STATE			6. House ID # 31355171

TYPE OF REPORT 8. Year 2004 Midyear (January 1-June 30) ☒ OR Year End (July 1-Dec 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 ☐

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: Less than \$10,000 <input checked="" type="checkbox"/> \$10,000 or more <input type="checkbox"/> >> \$ _____ <div style="text-align: right;">Income (nearest \$20,000)</div>	EXPENSES relating to lobbying activities for this reporting period were: Less than \$10,000 <input type="checkbox"/> \$10,000 or more <input type="checkbox"/> >> \$ _____ <div style="text-align: right;">Expenses (nearest \$20,000)</div>
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 accounting method. See instructions for description of methods. <input type="checkbox"/> Method A. Reporting amounts using LDA definition <input type="checkbox"/> Method B. Reporting amounts under section 6032 of the Internal Revenue Code <input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code

Signature _____ Date 08/19/2007

Printed Name and Title STEPHEN COOPER - Government Affairs Counselor Pg

Registrant Name: **PRESTON GATES ELLIS & ROUVELAS MEEDS LLP**

Client Name: **HOME CARE ASSOCIATION OF N.Y. STATE**

LOBBYING ACTIVITY. Select as many codes 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 as requested. Attach additional page(s) as needed.

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

16. Specific Lobbying issues

**H.R.1 , Medicare Prescription Drug and Modernization Act of 2003, matters related to Medicare and Medi
S.1 , Prescription Drug and Medicare Improvement Act of 2003, matters related to Medicare and Medicaid
Healthcare Workforce**

17. House(s) of Congress and Federal agencies contacted
**House of Representatives
Senate**

☐ Check if None

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

Name	Covered Official Position (if applicable)
COOPER, STEPHEN	

19. Interest of each foreign entity in the specific issues listed on line 16 above

☒ Check if None

Signature *[Signature]* Date 08/10/2009

Printed Name and Title STEPHEN COOPER - Government Affairs Counselor Pa