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H. D.

**LOBBYING REPORT**

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

1. Registrant Name <i>DAVID A. MALITO, LLP</i>	
2. Address <input type="checkbox"/> Check if different than previously reported <i>444 NORTH CAPITAL ST. SUITE 841</i>	
3. Principal Place of Business (if different from line 2) City: <i>WASHINGTON</i> State/Zip (or Country) <i>D.C. 20001</i>	
4. Contact Name <i>STEPHEN J. SLADE</i>	Telephone <i>(202) 347-1117</i>
E-mail (optional) <i>DCLOBBY@AOL.COM</i>	5. Senate ID # <i>11628-101</i>
7. Client Name <input type="checkbox"/> Self <i>MAGELLAN HEALTH SERVICE</i>	6. House ID # <i>3002901A</i>

TYPE OF REPORT 8. Year 1999 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	
<p><b>12. Lobbying Firms</b></p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> \$ _____  <small>Income (nearest \$20,000)</small></p> <p>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).</p>	<p><b>13. Organizations</b></p> <p>EXPENSES relating to lobbying activities for this reporting period were:</p> <p>Less than \$10,000 <input checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> \$ _____  <small>Expenses (nearest \$20,000)</small></p> <p><b>14. REPORTING METHOD.</b> Check box to indicate expense accounting method. See instructions for description of options.</p> <p><input checked="" type="checkbox"/> Method A. Reporting amounts using LDA definitions only</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code</p>

Signature *Stephen Slade*

Printed Name and Title *STEPHEN J. SLADE Director, Washington*

*pl 2*

Registrant Name Davidoff Malito, LLP Client Name MAGEIAN HEALTH SERVICE

**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 MMM (one per page)

16. Specific lobbying issues

*Issues affecting MEDICARE / MEDICAID*

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

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

Name	Covered Official Position (if applicable)	New
<i>KENNETH C. MALITO</i>		<input type="checkbox"/>
<i>STEPHEN J. SLADE</i>		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

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

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name and Title \_\_\_\_\_