

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

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

04 FEB 13 PM 1:52

LOBBYING REPORT

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

| | | | |
|---|------------------------------------|------------------------|------------------------------|
| 1. Registrant name Vinson & Elkins LLP | | | |
| 2. Address 1455 Pennsylvania Avenue, N.W., Suite 800, Washington, D.C. 20004-1008 | | | |
| 3. Principal place of business (if different from line 2) City | | State/Zip (or Country) | |
| 4. Contact Name Christine L. Vaughn | Telephone (202) 639-6500 | E-mail (optional) | 5. Senate II 40112 |
| 7. Client Name <input type="checkbox"/> Self Covenant Health System | | | 6. House II 31414 |

TYPE OF REPORT 8. Year 2003 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

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 reporting period were: |
| Less than \$10,000 <input checked="" type="checkbox"/> | Less than \$10,000 <input type="checkbox"/> |
| \$10,000 or more <input type="checkbox"/> ⇨ \$ _____ Income (nearest \$20,000) | \$10,000 or more <input type="checkbox"/> ⇨ \$ _____ 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 accounting method. See instructions for description of method. |
| | <input type="checkbox"/> Method A. Reporting amounts using LDA definition |
| | <input type="checkbox"/> Method B. Reporting amounts under section 6113 of the Internal Revenue Code |
| | <input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code |

Signature _____ Date _____

Printed Name and Title

Form LD-2 (Rev. 6/98)

Form LD-2 (Rev. 6/98)