

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

SECRET
05 JUL

LOBBYING REPORT

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

1. Registrant Name Brown Rudnick LLP			
2. Registrant Address <input type="checkbox"/> Check if different than previously reported Address 1201 Pennsylvania Avenue, NW Suite 325 City Washington State/Zip (or Country) DC 20005			
3. Principal Place of Business (if different from line 2) City _____ State/Zip (or Country) _____			
4. Contact Name Doyce Boesch			5. Senate ID # 287895-253
7. Client Name <input type="checkbox"/> Self Children's Health Fund			6. House ID # 37058011

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

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

Doyce Boesch

Signature Doyce W. Boesch Date _____

Printed Name and Title Doyce Boesch - Principal Page _____

Name: Brown Rudnick LLP

Client Name: Children's Health Fund

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 BUD (one per page)

16. Specific Lobbying issues

All issues/legislation pertaining to appropriations for FY 2005 including but not limited to mobile health vans.

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)
Boesch, Doyce	

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

Check if None

Signature



Date: 2/14/2004

Signature _____

Printed Name and Title Doyce Boesch - Principal Page _____

Name: Brown Rudnick LLP

Client Name: Children's Health Fund

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 HOM (one per page)

16. Specific Lobbying issues

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)

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

Check if None

Thomas P. Boesch

Signature  Date _____

Printed Name and Title **Doyce Boesch - Principal** Page _____