

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
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SECRETARY OF THE SENATE
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LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

- Check if this is an Amended Registration 1. Effective Date of Registration **02/08/2005**
2. House Identification Number _____ Senate Identification Number _____

REGISTRANT

3. Registrant name **Patton Boggs LLP**
Address **2550 M Street, NW**
City **Washington** State **DC** Zip **20037**
4. Principal place of business (if different from line 3)
City _____ State/Zip (or Country) _____
5. Telephone number and contact name
James B. Christian Contact **202-457-6484** E-mail (optional) _____
6. General description of registrant's business or activities
Law firm

CLIENT

7. Client name **Cascadia Behavioral Healthcare**
Address **P.O. Box 8459**
City **Portland** State **OR** Zip **97207**
8. Principal place of business (if different from line 7)
City _____ State/Zip (or Country) _____
9. General description of client's business or activities
A facility which provides a broad range of mental health services to those with low income in Oregon.

LOBBYISTS

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If listed in this section has served as a "covered executive branch official" or "covered legislative branch official" two years of first acting as a lobbyist for the client, *state the executive and/or legislative position(s) in which served.*

Name	Covered Official Position (if applicable)
Brian Lopina	
Daniel Bates	

Form LD-1 (Rev 06/98)

Registrant Name **Patton Boggs LLP**

Client Name **Cascadia Behavioral Healthcare**

LOBBYING ISSUES

11. General lobbying issue areas. Select all applicable codes listed in instructions and on reverse side of Form LD-
WEL

12. Specific lobbying issues (current and anticipated)
Mental Health services funding.

AFFILIATED ORGANIZATIONS

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the regi:
semiannual period and in whole or in major part plans, supervises or controls the registrant's lobbying activit:

No ⇨ Go to line 14.

Yes

Complete the rest of this section
entity matching the criteria above
proceed to line 14.

Name	Address	Principal Place of Busi (city and state or coun

FOREIGN ENTITIES

14. Is there any foreign entity that:

- a) holds at least 20% equitable ownership in the client or any organization identified on line 13
- b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances
subsidizes activities of the client or any organization identified on line 13; or
- c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in
outcome of the lobbying activity?

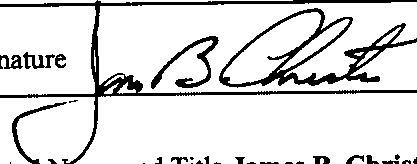
No ⇨ Sign and date the registration

Yes

Complete the rest of this section fo
entity matching the criteria above,
and date the registration.

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	C pe

Signature



Date: 03/16/2005

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

