00000802883

Clerk of the House of Representatives	Secretary of the Senate
Legislative Resource Center	Office of Public Records
B-106 Cannon Building	232 Hart Building
Washington, DC 20515	Washington, DC 20510

LOBBYING REPORT

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

1. Registrant Name
Williams & Jensen, PC

2. Registrant Address ☐ Check if different than previously reported
Address **1155 21st Street, NW** **Suite 300**
City **Washington** State/Zip (or Country) **DC 20036**

3. Principal Place of Business (if different from line 2)
City State/Zip (or Country)

4. Contact Name	Telephone	E-mail (optional)	5. Senate ID #
Barbara W. Bonfiglio	**202-659-8201**		**41454-51**

7. Client Name ☐ Self	6. House ID #
American Physical Therapy Association, PPS	**30771085**

TYPE OF REPORT

8. Year **2004** Midyear (January 1-June 30) ☒ **OR** Year End (July 1-De

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 Lobby

INCOME OR EXPENSES - Complete Either Line 12 **OR** Line 13

12. Lobbying Firms

INCOME relating to lobbying activities for this reporting period was:

Less than $10,000 ☐

$10,000 or more ☒ >> $ **$40,000.00**
Income (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).

13. Organizations

EXPENSES relating to lobbying activities for this rep period were:

Less than $10,000 ☐

$10,000 or more ☐ >> $ _____
Expenses (nearest $2

14. REPORTING METHOD. Check box to indicat accounting method. See instructions for description of

☐ **Method A.** Reporting amounts using LDA definit

☐ **Method B.** Reporting amounts under section 603 the Internal Revenue Code

☐ **Method C.** Reporting amounts under section 162 Internal Revenue Code

8/14/2004

Signature _____ Date _____

Printed Name and Title **Barbara W. Bonfiglio - Attorney** Pa

[redacted]gistrant Name: **Williams & Jensen, PC**

Client Name: **American Physical Therapy Association, PPS**

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
Medicare reimbursement
CMS rules concerning physician referrals
Therapy cap legislation
Physician fee schedule
HIPAA
Medical Records Privacy
MPDIMA

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

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

Name	Covered Official Position (if applicable)
Lynch, Karina V.	
Olsen, George G.	

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

Date **8/14/2004**

Signature _____ Date _____

Printed Name and Title **Barbara W. Bonfiglio - Attorney** Pa