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

SECRETARY OF THE SENATE
02 FEB 14 PM 4:36

LOBBYING REPORT

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

1. Registrant Name
Baker & Hostetler LLP

2. Registrant Address ☐ Check if different than previously reported
Address **1050 Connecticut Ave., N.W., #1100**
City **Washington** State/Zip (or Country) **DC 20036**

3. Principal Place of Business (if different from line 2)
City **Cleveland** State/Zip (or Country) **OH 44114**

4. Contact Name **Angela D. Jones** Telephone **(202) 861-1708** E-mail (optional)

5. Senate ID # **5131 241**

7. Client Name ☐ Self
Federation of American Hospitals

6. House ID # **3001 9060**

TYPE OF REPORT

8. Year **2001** 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

Signature Angela D. Jones Date **1/28/02**

Angela D. Jones - Of Counsel

Printed Name and Title [redacted] Pa

Registrant Name: **Baker & Hostetler LLP**

Client Name: **Federation of American Hospitals**

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 issues in the 107th Congress.

17. House(s) of Congress and Federal agencies contacted ☐ Check if None
Department of Health & Human Services
U.S. House of Representatives
U.S. Senate

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

Name	Covered Official Position (if applicable)
Graefe, Frederick H.	
Kennelly, Barbara	**Assoc. Commissioner-Social Security Administratio**
Kerrigan, Kathleen M.	

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

Signature _____ Date **1/28/02**

Angela D. Jones - Of Counsel



Registrant Name: **Baker & Hostetler LLP**

Client Name: **Federation of American Hospitals**

Information Update Page - Complete ONLY where registration information has changed.

20. Client new address

21. Client new principal place of business (if different from line 20)

City State/Zip (or Country)

22. New general description of client's business or activities

LOBBYIST UPDATE

23. Name of each previously reported individual who is **no longer** expected to act as a lobbyist for the client
Eckart, Dennis E.

ISSUE UPDATE

24. General lobbying issues previously reported that **no longer** pertain

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal Place of Bu (city and state or cou

26. Name of each previously reported organization that is **no longer** affiliated with the registrant or client

FOREIGN ENTITIES

27. Add the following foreign entities

Name	Address	Principal Place of Business (city and state or country)	Amount of contribution for lobbying activities

28. Name of each previously reported foreign entity that **no longer** owns, **or** controls, **or** is affiliated with the registr or affiliated organization

Signature _____ Date **1/28/02**

Angela D. Jones - Of Counsel

Printed Name and Title Angela D. Jones - Of Counsel

Pa