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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 2/1/2004

2. House Identification Number 34298002

Senate Identification Number 45835-0

REGISTRANT

3. Registrant name Richard F. Goodstein

Address 1101 Pennsylvania Ave., NW #510

City Washington

State DC

Zip 20004

4. Principal place of business (if different from line 3)

City

State/Zip (or Country)

5. Telephone number and contact name

(202) 659-1600

Contact Richard F. Goodstein

E-mail (optional) Goodste

6. General description of registrant's business or activities

Washington representation for corporations

CLIENT *A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should check this box and proceed to line 10.* Self

7. Client name Air Products Healthcare

Address 101 West Elm Street, Suite 210

City Conshohocken

State PA

Zip 19428

8. Principal place of business (if different from line 7)

City

State/Zip (or Country)

9. General description of client's business or activities

Provision of home healthcare medical equipment

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 any person in this section has served as a "covered executive branch official" or "covered legislative branch official" within two years of acting as a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

Name	Covered Official Position (if applicable)
Richard F. Goodstein	

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Registrant Name Richard F. Goodstein Client Name Air Products Healthcare

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LOBBYING ISSUES

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LB-1.

HCR

12. Specific lobbying issues (current and anticipated)

Implementation of the Medicare Modernization Act
Medicare issues involving home healthcare *medical equipment*

AFFILIATED ORGANIZATIONS

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

No ⇨ Go to line 14. Yes ⇩ Complete the rest of this section for each entity matchi criteria above, then proceed to line 14.

Name	Address	Principal Place of Bus (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; **OR**
- b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or subsi 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 the ot of the lobbying activity?

No ⇨ Sign and date the registration. Yes ⇩ Complete the rest of this section for ea matching the criteria above, then sign a registration.

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

Signature *Richard Goodstein* Date 07/15/200

Printed Name and Title _____

Form LD-1 (Rev. 04/03)