

Clear all data

Go to 'For

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

06 APR -7 PM 4:4

LOBBYING REPORT

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

1. Registrant name							
Organization		NATIONAL CAMPAIGN FOR HEARING HEALTH				(World Council on Heart-Health)	
2. Address		<input checked="" type="checkbox"/> Check if different than previously reported					
Address		2801 M Street, NW					
City		Washington		State DC		Zip Code 20007	
						Country USA	
3. Principal place of business (if different than line 2)							
City		State		Zip Code		Country	
City		State/Zip or Country					
4a. Contact Name		b. Telephone number		c. E-mail		5. Senate ID #	
Prefix Full Name							
Mr. Stephen K. Orr		202-719-8088		SKOrr@drf.org		56897-12	
7. Client Name		<input checked="" type="checkbox"/> Self				6. House ID #	
						35301000	

TYPE OF REPORT 8. Year 2004 Midyear (January 1-June 30) OR Year End (July 1-December 31)

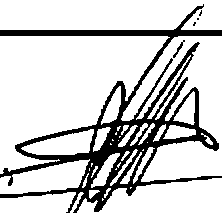
9. Check if this filing amends a previously filed version of this report

10. Check if this is a Termination Report → Termination Date Immediately (7-2004) 11. No Lobbying Activity

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms		13. Organizations	
INCOME relating to lobbying activities for this reporting period was:		EXPENSES relating to lobbying activities for this reporting period was:	
Less than \$10,000 <input type="checkbox"/>		Less than \$10,000 <input checked="" type="checkbox"/>	
\$10,000 or more <input type="checkbox"/> ⇒ \$ _____		\$10,000 or more <input type="checkbox"/> ⇒ \$ _____	
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).		14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of option	
		<input checked="" type="checkbox"/> Method A. Reporting amounts using LDA definitions only	
		<input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(3) of Internal Revenue Code	
		<input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Revenue Code	

Form Co

Signature: 

Date: 4/7/06

Printed Name and Title: Stephen K. Orr Executive Director

1000112908

Registrant Name NATL CAMPAIGN FOR HEARING HEALTH Client Name (WORLD) COUNCIL ON HEARING

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the registrant is engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code, information as requested. Attach additional page(s) as needed.

15. General issue area code _____ (one per page)

16. Specific lobbying issues

Add page to continue specific issues description for this issue

[Empty box for specific lobbying issues description]

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

[Empty box for House(s) of Congress and Federal agencies contacted]

18. Name of each individual who acted as a lobbyist in this issue area Add a page to continue adding lobbyists for this

First Name	Name Last Name	Suffix	Covered Official Position (if applicable)

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

Add a page for a different

Printed Name and Title Stephen K. Orr Executive Director

0000112909

Registrant Name NATL CAMPAIGN FOR HEARING HEALTH (WORLD COUNCIL ON HEA Client Name _____

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

20. Client new address

Address

City

State

Zip Code

Country

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

City

State

Zip Code

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

	First Name	Last Name	Suffix	First Name	Last Name	Suffix
1	SUE	GRELO		3		
2	DEJON	CUNNINGHAM		4		

ISSUE UPDATE

24. General lobbying issues that no longer pertain

Find the code to select below.

HCR

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal place of Business (city and state or country)
	Address C/S/Z	City State Country
	Address C/S/Z	City State

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

1	2	3
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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	Ownership percentage client
	Street Address City	State/Province, Country		
		City State Country		

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

1	3	5
2	4	6

Add a page for more update

Printed Name and Title Stephen K. Orr Executive Director

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