

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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SECRET

LOBBYING REPORT

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

1. Registrant name			
Organization	Richard L. Collins		
2. Address <input type="checkbox"/> Check if different than previously reported			
2111 Wilson Boulevard, Suite 700		Suite 700	
City	Arlington	State	VA
Zip Code	22201	Country	
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
Prefix	Full Name		
Ms.	T.L. Alexis Wears	703-351-5058	alex@collinsandcompany.com
7. Client Name <input type="checkbox"/> Self			5. Senate ID #
incentaHealth, Inc.			9922
			6. House ID #
			3277

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

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 Lobbying

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13	
<p>12. Lobbying Firms</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ _____</p> <p>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).</p>	<p>13. Organizations</p> <p>EXPENSES relating to lobbying activities for this report were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ _____</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description of</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definitive</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(e) Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code</p>

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Registrant Name Richard L. Collins Client Name incentaHealth, Inc.

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

15. General issue area code HCR - Health Issues (one per page)

16. Specific lobbying issues

Seeking HHS Committee support in effort to initiate pilot program using incentaHealth technology for federal employees.

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

Senate, House, & HHS.

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

Name			Covered Official Position (if applicable)
First Name	Last Name	Suffix	
James D.	Bond		
Thomas A.	Hooper		
Christina D.	West		
John-Paul C.	Hayworth		

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

Printed Name and Title T.L. Alexis Wears, Associate

Alex Wears

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Registrant Name Richard L. Collins Client Name incentaHealth, Inc.

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

1

Richard L.

Collins

3

2

4

ISSUE UPDATE

Find the code to select below.

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

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

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

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

1

2

3

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
	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 or affiliated organization

1

3

5

2

4

6

Add a page for me

Printed Name and Title T.L. Alexis Wears, Associate

Alex Wears Feb 11

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