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LOBBYING REPORT

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

	•	,
Organization IKON Public Affairs		
2. Address Check if different than previously reported		
Address 1 1101 30th Street, NW, Suite 220		
City Washington State	DC Zip Code 20007	Country USA
3. Principal place of business (if different than line 2)		***************************************
City State City State	Zip Code Zip or Country	Country
4a, Contact Name b, Telephone number Prefix Full Name	c. E-mail	5. Senate ID#
Ms. Corrin McKay 202-337-6600		11402277
7. Client Name Self		6. House ID#
Children's Hospital of Philadelphia ("CHOP")	•	3363802
INCOME OR EXPENSES - Complete Either Line 12. Lobbying Firms		nizations
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating to lobbying a were:	
		activities for this reporting
Less than \$10,000	Less than \$10,000	activities for this reporting
_		activities for this reporting
\$10,000 or more \$\Boxed{\times} \\$ 40,000 Provide a good faith estimate, rounded to the nearest \$20,000,		\$heck box to indicate expens
\$10,000 or more \$\Boxed{\times} \\$ 40,000 Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income from the client (including all	\$10,000 or more 14. REPORTING METHOD. C accounting method. See instruction	\$heck box to indicate expens
Less than \$10,000 \$10,000 or more \$\Begin{array}{cccccccccccccccccccccccccccccccccccc	\$10,000 or more 14. REPORTING METHOD. C accounting method. See instruction Method A. Reporting amounts	heck box to indicate expensions for description of option ints using LDA definitions only ants under section 6033(b)(8) o

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15. General iss	ue area code BUD - Bu	dget/Appropriati	ons (one per page)
16. Specific lot	obying issues		Add page to continue specific issues description for this is.
Labor HHS	Appropriations, Transpo	rtation Appropri	ations and Authorization
17 11 ()			. 1 🗔
	f Congress and Federal of Representatives, US S		cted Check if None
US house d	representatives, 05 c	senale	
			•
10 N			
18. Name of ea	ich individual who acte	d as a lobbyist i	1
18. Name of ea	nch individual who acted Name Last Name	d as a lobbyist i	n this issue area Add a page to continue additing lobby Covered Official Position (if applicable)
	Name	·	1
First Name	Name Last Name	·	1
First Name Peter	Name Last Name Grollman	·	Covered Official Position (if applicable)
First Name Peter Craig	Name Last Name Grollman Snyder	·	Covered Official Position (if applicable)
First Name Peter Craig	Name Last Name Grollman Snyder	·	Covered Official Position (if applicable)
First Name Peter Craig	Name Last Name Grollman Snyder	·	Covered Official Position (if applicable)
First Name Peter Craig	Name Last Name Grollman Snyder	·	Covered Official Position (if applicable)

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