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LOBBYING REPORT

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

1. Registrant name				
Organization	Blue Cross Blue Shield of Georgia			
2. Address <input type="checkbox"/> Check if different than previously reported				
Address1	3350 Peachtree Road, NE			
City	Atlanta	State	GA	Zip Code 30326 Country U
3. Principal place of business (if different than line 2)				
City	State	Zip Code	Country	
4a. Contact Name		b. Telephone number	c. E-mail	5. Senate ID #
Prefix	Full Name			
Mr.	Charles E. Harman	404-842-8980	charman@bcbsga.com	6405-
7. Client Name <input checked="" type="checkbox"/> Self				6. House ID #
Blue Cross Blue Shield of Georgia				332570

TYPE OF REPORT 8. Year 2004 Midyear (January 1-June30) OR Year End (July 1-December)

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 Act

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13	
<p align="center">12. Lobbying Firms</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input 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 align="center">13. Organizations</p> <p>EXPENSES relating to lobbying activities for this reporting period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> ⇒ \$ <u>40,000</u></p> <p>14. REPORTING METHOD. Check box to indicate expected accounting method. See instructions for description of options.</p> <p><input checked="" type="checkbox"/> Method A. Reporting amounts using LDA definitions</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(1) Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e)(1) Internal Revenue Code</p>

Form C

Printed Name and Title Charles E. Harman, Vice President

Charles E. Harman 2-9-05

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Printed Name and Title Charles E. Harman, Vice President



LD-2DS (REV. 4/03)

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Registrant Name Blue Cross Blue Shield of Georgia Client Name Blue Cross Blue Shield of Georgia

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

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

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	Street Address	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	Overseas client
	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 affiliated organization

1

3

5

2

4

6

Add a page for more

Printed Name and Title Charles E. Harman, Vice President

CHAS E HARMAN

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