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LOBBYING REPORT

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

1. Registrant Name <i>Boesch & Company</i>			
2. Address <input type="checkbox"/> Check if different than previously reported <i>1201 Pennsylvania Ave. N.W. Suite 315</i>			
3. Principal Place of Business (if different from line 2) City: <i>Washington DC</i> State/Zip (or Country) <i>20004</i>			
4. Contact Name <i>Doyce A. Boesch</i>	Telephone <i>D.A. Boesch & ATT. Det</i>	E-mail (optional)	5. Senate ID
7. Client Name <input type="checkbox"/> Self <i>Integrus Health System</i>			6. House ID

TYPE OF REPORT 8. Year 2003 Midyear (January 1-June 30) OR Year End (July 1-

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 Lobby

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 type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> ⇨ \$ <u>70,000</u> Income (nearest \$20,000)</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 period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ _____ Expenses (near</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for descriptive</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA de</p> <p><input type="checkbox"/> Method B. Reporting amounts under section Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section Internal Revenue Code</p>
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Signature *Doyce A. Boesch*

Printed Name and Title Doyen A. Boesch, President

Registrant Name Boesch & Company Client Name Integris Health

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 (one per page)

16. Specific lobbying issues

Health Issues In General, Appropriations

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

House & Senate

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

Name	Covered Official Position (if applicable)
<u>Dave A. Boesch</u>	

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

Signature Dave A. Boesch Date 8/14/03

Printed Name and Title Dave A. Boesch

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