Clerk of the House of Representatives Secretary of the Senate Legislative Resource Center B-106 Cannon Building Washington, DC 20515

Office of Public Records 232 Hart Building Washington, DC 20510

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LOBBYING REPORT

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

1. Registrant Name			
Washington Strategies, LLC			
2. Address Check if different than p	ore: ausly reported		
2111 Wilson Boulevard, Suite	600		
3. Principal Place of Business (if different t	rom line 2)		
City: Arlington	State/Z	ip (or Country) VA 22201	
4. Contact Name	Telephone	E-mail (optional)	5. Senate ID#
Monica Barron	(703) 351-5030	···	4066
7. Client Name Self			6. House ID#
Crozer-Keystone Health Syste	эm		32459
INCOME OR EXPENS	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Line 12 OR Line 13 13. Organ	nizations
INCOME relating to lobbying act		EXPENSES relating to lobbying	
period was:		period were:	
Less than \$10,000 \(\square\)		Less than \$10,000 ☐ \$ \$	
\$10,000 or more	\$60,000.00		Expenses (nearest \$20,0
	Income (nearest \$20,000)	14. REPORTING METHOD. Caccounting method. See instruction	
Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income from the client (including all		Method A. Reporting amounts using LDA defini	
payments to the registrant by an activities on behalf of the client).	y other entity for lobbying	Method B. Reporting amounts under section 602 Internal Revenue Code	
1		Internal Revenue	
		Internal Revenue Method C. Reporting amoun Internal Revenue	: Code nts under section 162

Filing #231f25ce-1d8e-4329-b65d-97b442a1fc44 - Page 1 of 8

Printed Name and Title	VVIIIIam F. Janen, Farmer
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LD-2 (REV. 6/98)

00030182034

Registrant Name	Washington Strategies, LLC	Client Name	Crozer-Keystone Health System
engaged in lobby	TIVITY. Select as many codes ing on behalf of the client during quested. Attach additional page(the reporting period	ect the general issue areas in which the red. Using a separate page for each code
15. General issue	e area code BUD (one p	er page)	
16. Specific lobb			
	Congress and Federal agencies c of Representatives	ontacted C	Check if None
18. Name of each	ch individual who acted as a lobb	oyist in this issue are	Covered Official Position (if applicable)
William P. Jarre		Partne	r
Jennifer Johnso		Partne	r
Troy Tidwell		Directo	or, Western Region
19. Interest of ea	ach foreign entity in the specific issu	es listed on line 16 ab	ove Check if None Date 2/14/03

Form LD-2 (Rev.6/98)

Registrant Name	Washington Strategies, LLC	Client Name	Crozer-Keystone Health System
engaged in lobbyir	TIVITY. Select as many codes on behalf of the client durin uested. Attach additional page	g the reporting period	et the general issue areas in which the r l. Using a separate page for each code
15. General issue	area code HCR (one	per page)	
16. Specific lobby	ving issues		
Health Issues			
17. House(s) of C	Congress and Federal agencies	contacted C	Check if None
U.S. House o U.S. Senate	of Representatives		
18. Name of each	h individual who acted as a lob	byist in this issue are	a
	Name		Covered Official Position (if applicable)
William P. Jarrell		Partner	
Jennifer Johnson		Partner	-
Troy Tidwell		Directo	or, Western Region

19. Interest of eac	th foreign entity in the specific iss	ues listed on line 16 abo	ove
(Date 2/14/03
Signature	1 /WVIX		Date 2/14/03
Printed Name and	l Title — William P. Jarrell, Partnel Filing #231f25ce-1d8e-4329-b6		e 5 of 8

Form LD-2 (Rev.6/98)

Registrant Name	Washington Strategies, LLC	Client Name	Crozer-Keysto	ne Health System
information U	- J pdate Page - Complete ON	LY where registrat	on information has cha	nged.
20. Client new addres	SS			
2111 Wilson I	Boulevard, Suite 600			
21. Client new princi	pal place of business (if different from l	· ·		
City Arlington		State/Zip (or Coun	ry) VA 22201	
	cription of client's business or activities			
	h previously reported individual	who is no longer ex	pected to act as a lobbyis	t for the client
Geoff Zieba Craig Richa				
		<u> </u>		
ISSUE UPDA' 24. General lobb	FE bying issues previously reported	that no longer pertai	n	
	ORGANIZATIONS owing affiliated organization(s)			
	Name	Address		Principal Place of Bus (city and state or co
26. Name of ea	ch previously reported organizat	tion that is no longer	affiliated with the registr	ant or client
FOREIGN EN	TITIES owing foreign entities			
Name	Addre		rincipal place of business (city and state or country)	Amount of contribution for lobbying activities
	ach previously reported foreign o	entity that no longer of	owns, <u>or</u> controls, <u>or</u> is a	ffiliated with the registra
affiliated (organization	$\left(\right)$		
Signature	///wll	<u> </u>	Date_	2/14/03

Printed Name and Title William\P. Jarrell, Partner

Form LD-2 (Rev. 6/98)

(Rev. 6/98)