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LOBBYING REPORT

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

1. Registrant Name Bockorny Petrizzo, Inc.			
2. Registrant Address <input checked="" type="checkbox"/> Check if different than previously reported Address 1101 16th Street, N.W. Suite 500 City Washington State/Zip (or Country) DC 20036 USA			
3. Principal Place of Business (if different from line 2) City _____ State/Zip (or Country) _____			
4. Contact Name David Bockorny			5. Senate ID #
7. Client Name <input type="checkbox"/> Self Fred Hutchinson Cancer Research Center			6. House ID #


TYPE OF REPORT 8. Year 2004 Midyear (January 1-June 30) OR Year End (July 1-December 31)

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

12. Lobbying Firms	13. Organizations
INCOME relating to lobbying activities for this reporting period was: Less than \$10,000 <input type="checkbox"/> \$10,000 or more <input checked="" type="checkbox"/> >> \$ <u>\$60,000.00</u> <small>Income (nearest \$20,000)</small>	EXPENSES relating to lobbying activities for this reporting period were: Less than \$10,000 <input type="checkbox"/> \$10,000 or more <input type="checkbox"/> >> \$ _____ <small>Expenses (nearest \$20,000)</small>
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).	14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description of method.
	<input type="checkbox"/> Method A. Reporting amounts using LDA definition <input type="checkbox"/> Method B. Reporting amounts under section 6033 of the Internal Revenue Code <input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code

Signature  _____ Date 11/12/2008

Printed Name and Title **David Bockorny - Chairman** _____ . P:

Client Name: Bockorny Petrizzo, Inc.

Client Name: Fred Hutchinson Cancer Research Center

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

15. General issue area code MED (one per page)
16. Specific Lobbying issues
HIV/AIDs related issues, no specific legislation

17. House(s) of Congress and Federal agencies contacted
House of Representatives
Senate

Check if None

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

Name	Covered Official Position (if applicable)
Bockorny, David	
Bowlin, Christopher	
Hutton, Michael	
Long, Chris	
Mathis, Josh	
Moll, Daniel R.	
Petrizzo, Thomas	

19. Interest of each foreign entity in the specific issues listed on line 16 above

Check if None

Signature _____ Date _____

Printed Name and Title David Bockorny - Chairman Page

Grant Name: **Bockorny Petrizzo, Inc.**Client Name: **Fred Hutchinson Cancer Research Center**

Item	Description	Data
18a	Lobbyist Name	Reese, Brenda
18b	Covered Official Position	
18c	New Lobbyist	No
18a	Lobbyist Name	Rivers, Phillip
18b	Covered Official Position	
18c	New Lobbyist	No
18a	Lobbyist Name	Schulman, Melissa
18b	Covered Official Position	
18c	New Lobbyist	No
18a	Lobbyist Name	Shearer, P. Scott
18b	Covered Official Position	
18c	New Lobbyist	No

