

Clear all data

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

Secretary of the Senate
Office of Public Records
232 Hart Building
Washington, DC 20510

SECRETARY OF THE SENATE

05 FEB 15 AM 11:20

LOBBYING REPORT

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

1. Registrant name			
Organization		[REDACTED]	
2. Address <input type="checkbox"/> Check if different than previously reported			
Address 1		[REDACTED]	
City	State	Zip Code	Country
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
3. Principal place of business (if different than line 2)			
City	State	Zip Code	Country
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
4a. Contact Name		b. Telephone number	c. E-mail
Prefix	Full Name		
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
7. Client Name <input type="checkbox"/> Self		5. Senate ID #	
[REDACTED]		[REDACTED]	
		6. House ID #	
		[REDACTED]	

TYPE OF REPORT 8. Year ☒ 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 [REDACTED]

11. No Lobbying Activity ☐

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>60,000</u></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 reporting period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ [REDACTED]</p> <p>14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options.</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definitions only</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code</p>
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Form Complete

Printed Name and Title

C. Michael [REDACTED] [REDACTED]

C. Michael Gutter 2/14/05

Registrant Name Golin HarrisClient Name University Health Associates

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

15. General issue area code

EDU

(one per page)

16. Specific lobbying issues

Add page to continue specific issues description for this issue >

THE REPUBLICAN PARTY

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

☒ Check if None

DOJ

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

Add a page to continue adding lobbyists for this

First Name	Name Last Name	Suffix	Covered Official Position (if applicable)
	<u>John</u>	<u>Mc</u>	

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

☒ Check if None

Add a page for a different i.

Printed Name and Title

LD-2DS (REV/03)

Michael Fulton, Executive VP

Page 2 of

Registrant Name Golin Harris Client Name University Health

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

15. General issue area code HEALTH (one per page)

16. Specific lobbying issues

Add page to continue specific issues description for this issue >

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

18. Name of each individual who acted as a lobbyist in this issue area Add a page to continue adding lobbyists for this

First Name	Name Last Name	Suffix	Covered Official Position (if applicable)
C	Michael	Harris	

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

Add a page for a different i

Printed Name and Title

LD-2DS (REV/03)

C. Michael Fulton, Executive V

C. Michael Fulton 2/14/05

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Registrant Name Golin Harris Client Name University Health

Information Update Page - Complete ONLY here registration information has changed.

20. Client new address

Address [REDACTED]
 City [REDACTED] State [REDACTED] Zip Code [REDACTED] Country [REDACTED]

21. Client new principal place of business (if different than line 20)

City [REDACTED] State [REDACTED] Zip Code [REDACTED] Country [REDACTED]

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	Suffix
1	[REDACTED]	[REDACTED]	[REDACTED]	3	[REDACTED]	[REDACTED]	[REDACTED]
2	[REDACTED]	[REDACTED]	[REDACTED]	4	[REDACTED]	[REDACTED]	[REDACTED]

ISSUE UPDATE

24. General lobbying issues that no longer pertain

[REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED]

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal place of Business (city and state or country)
[REDACTED]	Address [REDACTED] C/S/Z [REDACTED]	City [REDACTED] State [REDACTED] Country [REDACTED]
[REDACTED]	Address [REDACTED] C/S/Z [REDACTED]	City [REDACTED] State [REDACTED] Country [REDACTED]

26. Name of each previously reported organization that is no longer affiliated with the registrant or client

1 [REDACTED] 2 [REDACTED] 3 [REDACTED]

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	Owners percent client
[REDACTED]	City [REDACTED]	State/Province [REDACTED] Country [REDACTED]	City [REDACTED] State [REDACTED] Country [REDACTED]	[REDACTED]	[REDACTED]

28. Name of each previously reported foreign entity that no longer owns, or controls, or is affiliated with the registrant, client or affiliated organization

1 [REDACTED] 3 [REDACTED] 5 [REDACTED]
 2 [REDACTED] 4 [REDACTED] 6 [REDACTED]

Add a page for more updates

Printed Name and Title

LD-2DS (REV03)

C. Michael Fulton, Executive VP

C. Michael Fulton 2/14/05

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