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SECRETARY OF THE SENATE
03 AUG -6 AM 10:39

LOBBYING REPORT

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

1. Registrant Name
HENRY CONSULTING GROUP

2. Address Check if different than previously reported
9707 TURNBUCKLE DRIVE

3. Principal Place of Business (if different from line 2)
City: **BURKE** State/Zip (or Country) **VA/22015**

4. Contact Name Telephone E-mail (optional)
P.T. HENRY 703-455-2990

5. Senate ID #

6. House ID #
35640000

7. Client Name Self
DELTA DENTAL OF CALIFORNIA

TYPE OF REPORT 8. Year 2003 Midyear (January 1-June 30) 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 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 checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ _____ 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 reporting period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ _____ Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of option</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definitions on</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8); Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) of Internal Revenue Code</p>
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Signature _____

Director Name and Title I. I. JENRY PRESIDENT

LD-2 (REV. 6/98)

PAGE 1 of

Registrant Name HENRY CONSULTING GROUP Client Name DELTA DENTAL OF CALIFORNIA

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 HCR (one per page)

16. Specific lobbying issues

DOD/DVA HEALTH AND DENTAL CARE

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

DOD
DVA

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

Name	Covered Official Position (if applicable)
<u>P.T. HENRY</u>	<u>ASSISTANT SECRETARY OF THE ARMY</u>

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

Signature *P.T. Henry* Date 7/22/03
Printed Name and Title P.T. HENRY PRESIDENT

