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SECRETARY OF THE SENATE

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LOBBYING REPORT

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

1. Registrant Name Dennis Beal -- dba Beal Johnson, Inc.			
2. Address <input type="checkbox"/> Check if different than previously reported 1620 L Street, NW, Suite 875, Washington, DC 20036			
3. Principal Place of Business (if different from line 2) City: _____ State/zip (or Country) _____			
4. Contact Name Dennis Beal	Telephone (202) 296-7808	E-mail (optional) thebeal@bealjohnson.com	5. Senate ID #
7. Client Name <input type="checkbox"/> Self FBA - Florida Hospital College of Health Sciences			6. House ID #

TYPE OF REPORT 8. Year 2003 Midyear (January 1-June 30) OR Year End (July 1-Dec
9. Check if this filing amends a previously filed version of this report 10. Check if this is a Termination Report ⇨ Termination Date 2/3/2003

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>10,000.00</u> <small>Income (nearest \$20,000)</small>	EXPENSES relating to lobbying activities for this reporting period were: Less than \$10,000 <input checked="" 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 checked="" type="checkbox"/> Method A. Reporting amounts using LDA definition <input type="checkbox"/> Method B. Reporting amounts under section 6033 Internal Revenue Code <input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code

Signature _____ Date _____

Printed Name and Title _____

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Registrant Name Dennis Beal -- dba Beal Johnson, Inc. Client Name FBA - Florida Hospital College of Health Scier

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

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

16. Specific lobbying issues

VA/HUD appropriations

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

Senate
House of Representatives

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

Name	Covered Official Position (if applicable)
Dennis Beal	

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

Signature  Date 3/26/2004

Printed Name and Title Dennis Beal, Principal

Form LD-2 (Rec. 4/03)

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