

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
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# LOBBYING REPORT

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

1. Registrant Name <u>Public Policy Partners LLC</u>			
2. Address <input checked="" type="checkbox"/> Check if different than previously reported <u>101 Constitution Ave, NW Ste 800 Washington, DC 200</u>			
3. Principal Place of Business (if different from line 2) City: _____ State/Zip (or Country) _____			
4. Contact Name <u>Trey Barnes</u>	Telephone <u>202-742-4337</u>	E-mail (optional)	5. Senate ID # <u>82410-</u>
7. Client Name <input type="checkbox"/> Self <u>Lake Charles Memorial Hospital</u>			6. House ID # <u>335450</u>

**TYPE OF REPORT** 8. Year 2004 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 A

## INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p><b>12. Lobbying Firms</b></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>120,000</u>  <small>Income (nearest \$20,000)</small></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><b>13. Organizations</b></p> <p>EXPENSES relating to lobbying activities for this report period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____  <small>Expenses (nearest \$20,000)</small></p> <p><b>14. REPORTING METHOD.</b> Check box to indicate reporting method. See instructions for description of</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(f) Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code</p>
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Signature \_\_\_\_\_

*[Handwritten Signature]*

Printed Name and Title G. FRANK JAMES JR, PRESIDENT

LD-2 (REV. 6/98)

PAG

Registrant Name Public Policy Partners LLC Client Name Lake Charles Memorial Hospital

**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 BUD (one per page)

16. Specific lobbying issues

Energy and Water Appropriations bill for FY '05

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

Check if None

House  
Senate

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

Name	Covered Official Position (if applicable)
<u>C. Furman Barnes III</u>	
<u>Maurice J. Welch</u>	
<u>Andrew Cochran</u>	<u>Sr. Oversight Counsel, House Fin Services</u>

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

Check if None

Signature

[Handwritten Signature]

Date

7/29/04

Decided

Printed Name and Title G. KUMAR - 1004740 - 1004740

Page

Registrant Name Public Policy Partners LLC Client Name Lake Charles Memorial Hosp

**Information Update Page - Complete ONLY where registration information has changed.**

20. Client new address

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

City

State/Zip (or Country)

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

Maurice J. Walsh

**ISSUE UPDATE**

24. General lobbying issues previously reported that no longer pertain

**AFFILIATED ORGANIZATIONS**

25. Add the following affiliated organization(s)

Name	Address	Principal Place of Busin (city and state or coun

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

**FOREIGN ENTITIES**

27. Add the following foreign entities

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities

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

Signature

[Handwritten Signature]

Date

7/29/04

Printed Name and Title G. Furman Barnes III President

Page