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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 Hall, Render, Killian, Heath & Lyman			
2. Address <input type="checkbox"/> Check if different than previously reported One American Square, Suite 2000, Box 82064			
3. Principal Place of Business (if different from line 2) Indianapolis Indiana 46282 City: State/zip (or Country)			
4. Contact Name John C. Render	Telephone (317) 633-4884	E-mail (optional) jrender@hallrender.com	5. Senate ID # 17352
7. Client Name <input type="checkbox"/> Self Porter Memorial Hospital			6. House ID # 3005900

TYPE OF REPORT 8. Year 2004 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 _____ 11. No Lobbying

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms	13. Organizations
<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>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 accounting method. See instructions for description of method.</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definitive accounting method.</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code</p>

Signature _____ Date _____

Printed Name and Title _____ John C. Render, Chairman of the Board _____

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Registrant Name Hall, Render, Killian, Heath & Lyman Client Name Porter Memorial Hospital

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

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

16. Specific lobbying issues

Secure Medicare/Medicaid payments for client.

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

Indiana House and Senate members

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

Name	Covered Official Position (if applicable)
John C. Render	

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

Signature John C. Render Date 8-11-04

Printed Name and Title

JOHN C. RENDLER, Chairman of the Board

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Registrant Name Hall, Render, Killian, Heath & Lyman Client Name Porter Memorial Hospital

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

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 Bu (city and state or co

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

John C. Render

Date

8-11-04

Printed Name and Title John C. Render, Chairman of the Board

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