

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  
05 MAY 25 AM

## LOBBYING REPORT

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

1. Registrant Name <u>Baptist Health System, Inc.</u>			
2. Address <input type="checkbox"/> Check if different than previously reported <u>P.O. Box 830605</u>			
3. Principal Place of Business (if different from line 2) City: <u>Birmingham</u> State/Zip (or Country) <u>AL 35283-0605</u>			
4. Contact Name <u>Judi McGuire</u>	Telephone <u>(205) 715-5843</u>	E-mail (optional)	5. Senate ID # <u>5324</u>
7. Client Name <input checked="" type="checkbox"/> Self			6. House ID # <u>316790</u>

TYPE OF REPORT 8. Year 2005 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 05-31-05 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:	EXPENSES relating to lobbying activities for this reporting period were:
Less than \$10,000 <input type="checkbox"/>	Less than \$10,000 <input checked="" type="checkbox"/>
\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Income (nearest \$20,000)	\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (nearest \$20,000)
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:
	<input type="checkbox"/> Method A. Reporting amounts using LDA definition
	<input checked="" type="checkbox"/> Method B. Reporting amounts under section 603 Internal Revenue Code
	<input type="checkbox"/> Method C. Reporting amounts under section 162 Internal Revenue Code

Signature

Judi McGuire

Printed Name and Title Judi McGuire, System Director Governmental Rel.

LD-2 (REV. 6/98)

Registrant Name Baptist Health System Client Name Self

**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 cod information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

H.R. 985 Bipartisan Commission on Medicaid Act of 2005  
S. 338 Bipartisan Commission on Medicaid Act of 2005

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

Check if None

U.S. House of Representatives  
U.S. Senate

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

Name	Covered Official Position (if applicable)
<u>Judi McGuire</u>	

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

Check if None

Signature Judi McGuire Date 5-17-05

Printed Name and Title Judi McGuire, System Director Governmental Re

Form LD-2 (Rev.6/98)

Page

Registrant Name \_\_\_\_\_ Client Name \_\_\_\_\_

**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 registra affiliated organization

Signature

*Audi Mc Guire*

Filing #6de8abcd-e874-417c-a210-1eba43a8d7c1 - Page 5 of 6

Date

5-17-05

Printed Name and Title Judi McGuire, System Director Governmental k  
Form LD-2 (Rev. 6/98) Page .