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LOBBYING REPORT

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

1. Registrant name

Organization **The Gallatin Group**

2. Address ☐ Check if different than previously reported

Address1 **400 N Capitol St, NW**

Suite 585

City **Washington**

State **DC**

Zip Code **20001**

Country **USA**

3. Principal place of business (if different than line 2)

City

State

Zip Code

Country

State/Zip or Country

4a. Contact Name

Prefix Full Name

Ms. Samantha Benton

b. Telephone number

(202) 737-1330

c. E-mail

sbenton@gallatingroup.com

5. Senate ID

15747-354

7. Client Name

☐ Self

St. Peter's Hospital

6. House ID

32408022

TYPE OF REPORT

8. Year **2005**

Midyear (January 1-June 30) ☒

OR

Year End (July 1-December 31)

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

12. Lobbying Firms

INCOME relating to lobbying activities for this reporting period was:

Less than \$10,000 ☐

\$10,000 or more ☒ ⇒ \$ **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).

13. Organizations

EXPENSES relating to lobbying activities for this reporting period were:

Less than \$10,000 ☐

\$10,000 or more ☐ ⇒ \$ _____

14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options.

- ☐ **Method A.** Reporting amounts using LDA definitions only
- ☐ **Method B.** Reporting amounts under section 6033(b)(8) of the Internal Revenue Code
- ☐ **Method C.** Reporting amounts under section 162(e) of the Internal Revenue Code

Form Comp

Printed Name and Title **Samantha Benton, Associate**

Registrant Name The Gallatin GroupClient Name St. Peter's Hospital

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the registrant is 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 - Health Issues (one per page)

16. Specific lobbying issues

Add page to continue specific issues description for this issue



Secure federal funding for hospital expansion and related projects.

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

US Senate, US House of Representatives

18. Name of each individual who acted as a lobbyist in this issue area Add a page to continue adding lobbyists for this issue

First Name	Name Last Name	Suffix	Covered Official Position (if applicable)
Will	Hollier		
Zak	Andersen		Chief of Staff, Senator Max Baucus
Samantha	Benton		
John	Etchart		
Cara	Dalmolin		LC to Rep. Shadegg

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

Add a page for a different issue

Printed Name and Title Samantha Benton, Associate

Registrant Name The Gallatin GroupClient Name St. Peter's Hospital**Information Update Page - Complete ONLY where registration information has changed.**

20. Client new address

Address

City

State

Zip Code

Country

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

City

State

Zip Code

Country

22. New general description of client's business or activities

LOBBYIST UPDATE23. Name of each previously reported individual who is **no longer** expected to act as a lobbyist for the client

First Name

Last Name

Suffix

First Name

Last Name

Suffix

1 Cara Dalmolin

3

2

4

ISSUE UPDATE

Find the code to select below.

24. General lobbying issues that **no longer** pertain**AFFILIATED ORGANIZATIONS**

25. Add the following affiliated organization(s)

Name	Address	Principal place of Business (city and state or country)
	Address	City
	C/S/Z	State Country
	Address	City
	C/S/Z	State

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

1

2

3

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	Ownership percentag client
	Street Address			
	City State/Province Country	City		
		State Country		

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

1

3

5

2

4

6

Add a page for more updates

Printed Name and Title Samantha Benton, Associate

 03/10/05