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| Clerk of the House of Representatives<br>Legislative Resource Center<br>B-106 Cannon Building<br>Washington, DC 20515 | Secretary of the Senate<br>Office of Public Records<br>232 Hart Building<br>Washington, DC 20510 |
|---|--|

# LOBBYING REPORT

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

1. Registrant name  
Prefix **Ms.** First **Kathleen** Last **Eyre**

2. Address  Check if different than previously reported  
3004 Q St. NW  
City **Washington** State **DC** Zip Code **20007** Country

3. Principal place of business (if different than line 2)  
City **1225 19th Street NW** State **DC** Zip Code **20036** Country

|  |  |   |                                |
|--|--|---|--------------------------------|
| 4a. Contact Name<br>Prefix <b>Ms.</b> Full Name <b>Kathleen Eyre</b> | b. Telephone number<br><b>202-487-7398</b> | c. E-mail<br><b>Kathleen.Eyre@Broadlane.com</b> | 5. Senate ID #<br><b>29781</b> |
| 7. Client Name<br><input type="checkbox"/> Self<br><b>Broadlane</b>  |  |   | 6. House ID #<br><b>37574</b>  |

**TYPE OF REPORT** 8. Year **2005** 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

**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 checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> → \$</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 reporting period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> → \$</p> <p><b>14. REPORTING METHOD.</b> Check box to indicate accounting method. See instructions for description of</p> <p><input type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definition</p> <p><input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 6033 Internal Revenue Code</p> <p><input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162(c) Internal Revenue Code</p> |
|---|---|

Printed Name and Title **Kathleen Eyre, Independant policy consultant**

0000423461



Registrant Name Kathleen Eyre

Client Name Broadlane

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which the registrant was engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code and providing 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*

S. 2880 -- "The Medical Competition Act of 2004" -- all provisions related to regulation of group purchasing organizations

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

Senate

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

| First Name | Name      |        | Covered Official Position (if applicable) |
|------------|-----------|--------|---|
|            | Last Name | Suffix |   |
| Kathleen   | Eyre      |        |   |
|            |           |        |   |
|            |           |        |   |
|            |           |        |   |
|            |           |        |   |
|            |           |        |   |
|            |           |        |   |
|            |           |        |   |
|            |           |        |   |

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

*Add a page for a*

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Printed Name and Title Kathleen Eyre, independant policy consultant

LD-2DS (R)

Page

Registrant Name Kathleen Eyre

Client Name Broadlane

**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 UPDATE**

23. 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

1

3

2

4

**ISSUE UPDATE**

Find the code to select below.

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

Grid of checkboxes for selecting issues that no longer pertain.

**AFFILIATED ORGANIZATIONS**

25. Add the following affiliated organization(s)

| Name | Address | Principal place of Bus<br>(city and state or country) |
|------|---------|---|
|      | Address | City  |
|      | C/S/Z   | State   |
|      | Address | Country   |
|      | C/S/Z   | City  |
|      |         | 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<br>(city and state or country) | Amount of contribution<br>for lobbying activities |
|------|----------------|--|---|
|      | Street Address | City   |   |
|      | 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 or affiliated organization

1

3

5

2

4

6

Add a page for m

Printed Name and Title Kathleen Eyre, Independant policy consultant

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