

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  
03 AUG -P 1

# LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration ☐

1. Effective Date of Registration 6/19/03

2. House Identification Number \_\_\_\_\_ Senate Identification Number \_\_\_\_\_

## REGISTRANT

3. Registrant name Thune Group LLC

Address 2612 S. Princeton Avenue

City Sioux Falls

State SD

Zip 57106

4. Principal place of business (if different from line 3)

City \_\_\_\_\_

State/Zip (or Country) \_\_\_\_\_

5. Telephone number and contact name

( 605 ) 376-8135

Contact John Thune

E-mail (optional) \_\_\_\_\_

6. General description of registrant's business or activities

Government relations consulting

**CLIENT** *A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should be labeled "Self" and proceed to line 10.* ☐ Self

7. Client name Sioux Valley Hospitals & Health Systems

Address 1305 West 18th Street

City Sioux Falls

State SD

Zip 57117-5039

8. Principal place of business (if different from line 7)

City \_\_\_\_\_

State/Zip (or Country) \_\_\_\_\_

9. General description of client's business or activities

Health care facilities

## LOBBYISTS

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any person in this section has served as a "covered executive branch official" or "covered legislative branch official" within two years of acting as a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

Name	Covered Official Position (if applicable)
<u>John Thune</u>	<u>U.S. Representative (R-SD)</u>
_____	_____
_____	_____



Thune Group LLC  
 Registrant Name \_\_\_\_\_ Client Name Sioux Valley Hospitals & Health Sy

## LOBBYING ISSUES

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1

HCR

MMM

12. Specific lobbying issues (current and anticipated)

Medicare reform in connection with Centers for Medicare and Medicaid Services  
 regulation of hospitals

## AFFILIATED ORGANIZATIONS

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the a semiannual period and in whole or in major part plans, supervises or controls the registrant's lobbying

☒ No ⇒ Go to line 14.

☐ Yes ↓ Complete the rest of this section for each entity the criteria above, then proceed to line 14.

Name	Address	Principal Place of Bus (city and state or cou
.....	.....	.....

## FOREIGN ENTITIES

14. Is there any foreign entity that:

- a) holds at least 20% equitable ownership in the client or any organization identified on line 13; **OR**
- b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or activities of the client or any organization identified on line 13; **OR**
- c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in t of the lobbying activity?

☒ No ⇒ Sign and date the registration.

☐ Yes ↓ Complete the rest of this section for ea matching the criteria above, then sign registration.

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

Signature John P. Thune

Date 7/31/03

Signature [Handwritten Signature]

Printed Name and Title John Thune, President

Form LD-1 (Rev. 06/98)