

## LOBBYING REPORT

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

1. Registrant Name:

**BOCKORNY GROUP, INC**

2. Address:

1101 16TH STREET, NW, SUITE 500, WASHINGTON, DC 20036

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

4. Contact Name: DAVID BOCKORNY

Telephone: 2026599111

E-mail (optional): kbreiwa@bockornygroup.com

Senate ID #: 289773-470

House ID #:

7. Client Name:  Self

**KAISER FOUNDATION HEALTH PLAN**

### TYPE OF REPORT

8. Year 2007 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: Apr 14, 2007 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:  => Income (nearest \$20,000): 60,000.00

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:  => Expenses (nearest \$20,000): \_\_\_\_\_

#### 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

## LOBBYING ACTIVITY

Select as many codes as necessary to reflect the general issue areas in which the registrant 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 (one per page)

16. Specific lobbying issues:

Issues related to the implementation of the Medicare Drug Benefit Prescription drug safety and supply issues Health information technology issues Issues relating to the Federal Employee Health Benefits Plan

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

Executive Office of the President (EOP)  
HOUSE OF REPRESENTATIVES  
Health & Human Services, Dept of (HHS)  
Labor, Dept of (DOL)  
SENATE

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

Name: BOCKORNY, DAVID  
Covered Official Position (if applicable): N/A  
Name: CROWDERS, CHUCK  
Covered Official Position (if applicable): N/A  
Name: DEPOY, MARTIN  
Covered Official Position (if applicable): N/A  
Name: DODSON, ANDREW  
Covered Official Position (if applicable): N/A  
Name: LEDWIN, LINDSEY  
Covered Official Position (if applicable): N/A  
Name: MAJOR, DIANE  
Covered Official Position (if applicable): N/A  
Name: REESE, BRENDA  
Covered Official Position (if applicable): N/A  
Name: RINGLEY, SHARON  
Covered Official Position (if applicable): N/A  
Name: SCHULMAN, MELISSA  
Covered Official Position (if applicable): N/A  
Name: SHEARER, P SCOTT  
Covered Official Position (if applicable): N/A  
Name: SIMS, MICHAELA  
Covered Official Position (if applicable): LEGISLATIVE COUNSEL TO SENATOR BEN NELSON  
Name: THORPE, TODD  
Covered Official Position (if applicable): CHIEF OF STAFF TO CONGRESSMAN CHRIS CANNON  
Name: VAN POOL, KEN  
Covered Official Position (if applicable): N/A

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

Signature: ON FILE Date: Jun 27, 2007

Printed Name and Title: DAVID BOCKORNY - CEO -

**Information Update Page:**

**Complete ONLY where registration information has changed.**

**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 organization(s)**

**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**

**28. Name of each previously reported foreign entity the NO LONGER owns, OR controls, OR is affiliated with the registrant, client or affiliated organization**

Signature: ON FILE      Date: Jun 27, 2007

Printed Name and Title: -