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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



## **LOBBYING REPORT**

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

1. Registrant name		
Council for Affordable Health Insuran	ce	
2. Address Check if different than previously reported		
127 South Peyton Street, Suite 210		
Alexandria V	<b>A</b> 22:	314 US/
3. Principal place of business (if different than line 2)		
3.1 micipal place of ousiness (it different man fine 2)		
	p or Country	***************************************
4a. Contact Name b. Telephone number	c. E-mail	5. Senate ID#
•	nter@cahi.org	
7. Client Name Self		6. House ID #
Council for Affordable Health Insurance		31836000
TYPE OF REPORT 8. Year 2006 Midyear (January	/ 1-June30) <b>区</b> OR	Year End (July 1-December
9. Check if this filing amends a previously filed version of this report	<u>-</u>	
10. Check if this is a Termination Report $\square$ $\Leftrightarrow$ Termination Date		11. No Löbbying Activ
INCOME OR EXPENSES - Complete Either Line 1:	2 OR Line 13	
12. Lobbying Firms		3. Organizations
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating to lowere:	bbying activities for this reporting
Less than \$10,000	Less than \$10,000	
\$10,000 or more	\$10,000 or more X	⇒ \$70,000
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).		HOD. Check box to indicate expensions for description of options
	Method B. Repor	ting amounts using LDA definitions or ting amounts under section 6033(b)(8)
·	Method C. Repor	al Revenue Code ting amounts under section 162(e) of t nue Code
Angela M. Hunter    Digitaly signed by Angela M Hunter   Del Cit   Del Cit	- Business	#Edit Form > File wit Password File wit 8/9/2006

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6. Specific lo	bbying issues (continued from previou	s page)	
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	State High Risk Pool Funding Extension A the State High Risk Pool Funding Extension		
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	the Hospital Price Disclosure Act of 2005 the Health Care Choice Act		
	Health Care Choice Act	- 1-1-10005	
	e Deficit Reduction Omnibus Reconciliation e Health Insurance Marketplace Moderniza		bility Act
	e Medicare Payment Rate Disclosure Act of the Hospital and ASC Price Disclosure and		ation Ant of COOF
	the Health Care Choices for Seniors Act	d Liugation Prote	Ction Act of 2005
	e Affordability in the Individual Market Act the Tax Free Health Savings Act		
H.R. 5475,	the HSA Accessibility & Portability Act		
H.R. 5647, S 3708 FY	FY2007 Labor, Health & Human Services '2007 Labor, Health & Human Services an	and Education and	nd Related Agencies Appropriation  Related Agencies Appropriations
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Printed Name and Title Angela M. Hunter, Director of Federal Affairs

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ADDENDUM for General Lobbying Issue Area INS  16. Specific lobbying issues (continued from previous page)  H.R. 1872, the Health Coverage for the Uninsured Act S. 288, the State High Risk Pool Funding Extension Act of 2005 H.R. 3204, the State High Risk Pool Funding Extension Act of 2005	Council for Affordable Health Insurance Registrant Name		ouncil for Affordable Health Insuranc
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Registrant Name Council for Affordate	le Health Insurance	Client Name Council for	Affordable Health Insur	ance
Information Update Page	- Complete ONL	Y where registration infor	mation has change	d.
20. Client new address				
21. Client new principal place of b	usiness (if different that	n line 20)		*************
City	State	e/Zip		
22. New general description of clie	nt's business or activiti	ies		
LOBBYIST UPDATE				
23. Name of each previously rep	orted individual who	is <b>no longer</b> expected to act	as a lobbyist for the cl	ient
Adam Brackemy	re			
ISSUE UPDATE			`	
24. General lobbying issues that	no longer pertain			
AFFILIATED ORGANIZA	ΓΙΟΝS			
25. Add the following affiliated of	organization(s)			
Name		Address	Principal place of Business (city and state or country)	
	•			
26. Name of each previously rep	orted organization th	at is no longer affiliated with	the registrant or client	
FOREIGN ENTITIES 27. Add the following foreign en	tities			
Name	Address	Principal place of business	Amount of contribution	Owne
	•••••••••••••••••••••••••••••••••••••••	(city and state or country)	for lobbying activities	client
20 M	1.0			
28. Name of each previously report affiliated organization	ed foreign entity that n	o longer owns, <u>or</u> controls, <u>or</u> is	affiliated with the regis	rant, c
	11 -			
Signature Mayla M.	Hunch	Date	8/9/2006	
Printed Name and Title Angela				

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