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SECRETARY OF THE SENATE 00 AUG 21 AM 9:08

LOBBYING REPORT

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

1. Registrant Name TRIWEST HEALTHCARE AL	LIANCE	
2. Address Check if different than previously reported		
15451 N. 28TH AVENUE		
3. Principal Place of Business (if different from line 2)		
City: PHOENIX State/2	Sp (or Country) AZ	
4. Contact Name Telephone	É-mail (optional)	5. Senate ID #
GLENN T. GRAY (602) 564	-2078 GLRANDTRIWEST	ом <i>39506-</i> 12
7. Client Name Self		6. House ID #
	•	33361000
TYPE OF REPORT. 8. Year <u>2000</u> Midyear 9. Check if this filing amends a previously filed version of this 10. Check if this is a Termination Report □ ⇒ Termination	To the state of the second sec	
INCOME OR EXPENSES - Complete Either	Line 12 OR Line 13	
12. Lobbying Firms	13. Organizat	tions
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating to lobbying activ period were:	ities for this reporting
Less than \$10,000 🔘 "	Loss than \$10,000 - 🖸	
\$10,000 or more	\$10,000 or more X = 5 40	200 nses (nearest \$20,000)
· · · · · · income (nearest \$20,000)	14. REPORTING METHOD. Check	
Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income from the client (including all	accounting method. See instructions for Method A. Reporting amounts us	
payments to the registrant by any other entity for lobbying activities on behalf of the client).	Method B. Reporting amounts un Internal Revenue Cod	ider section 6033(b)(8)of the
L. ANZA	Method C. Reporting amounts un Internal Revenue Cod	nder section 162(e) of the
Signovare		
Printed Name and Title GLENN T. GRAY.	RECTOR, CONG. 4 CUST	OMER RELATIONS
1.O-2 (REV. 6/98)		PAGE LOT 5

Registrant Name TRINEST Client N	iame SAME	-
EOBBYING ACTIVITY. Select as many codes as necess engaged in lobbying on behalf of the client during the repoinformation as requested. Attach additional page(s) as need 15. General issue area code	rting period. Using a separate page for each code, provide	
15. General issue area code VCI (one per page)		
16. Specific lobbying issues		
· DEFENSE HEALTH		
. DEFENSE AUTHORIZATION		
. WEDICARE SUBVENTION /TSI	7	
· III	.	
17. House(s) of Congress and Federal agencies contacted • U.S. House of Representatives	Check if None	
U.S. SENATE		
· DEPARTMENT OF DEFENSE		
18. Name of each individual who acted as a lobbyist in th	is issue area	
Name	Covered Official Position (if applicable)	New
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19. Interest of each foreign entityin the specific issues listed o	a line 16 above	•
MAZI	Date 8/10/00 RECTOR, CONG. & CUSTOMER RELATIO	
Printed Name and Title GLENN T. GRAY DI	RECTOR, CONG. & CUSTOMER RELATIO	<u>u</u> 5
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Registrant Name TRINEST Client No.	ame SAME	
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35. General issue area code HCR (one per page)	•	
16. Specific lobbying issues • DEFENSE HEALTH • DEFENSE AUTHORIZATION		
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. WEDICARE SUBVENTION / TSF		•
17. House(s) of Congress and Federal agencies contacted U.S. House of Representatives U.S. SENATE DEPARTMENT OF DEFENSE	Check if None	
18. Name of each individual who acted as a lobbyist in thi	s issue area	
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19. Interest of each foreign entity in the specific issues listed on	line 16 above Check if None	
Signatur	Date 8/10/00 RECTOR, COMA. & CHISTOMER RELATIO	·····
Printed Name and Title GIENN T. GRAY, Di	BECTOR, CONG. & CLISTOMER RELATIO	2115
Form 1,D-2 (Rev 6/98)	Page 3 of	5_

	Name SAME	
	ssary to reflect the general issue areas in which the registrant porting period. Using a separate page for each code, provide seded.	
5. General issue area code MMM (one per page)) ·	
6. Specific lobbying issues	t .	
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. DEFENSE AUTHORIZATION		
. WEDICARE SUBVENTION /TS	P	
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· U.S. SENATE	•	
· DEPARTMENT OF DEFENSE		
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Signature 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Date 8/10/00	
Printed Name and Title GLENN T. GRAY 1	DIRECTOR, CONG. & CUSTOMER RELATIO	<u>ม</u> \$
Printed Name and Title GLENN T. GRAY D	Date 8/10/00 DIRECTOR, CONG. & CUSTOMER RELATIO	

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