

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
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SECRETARY OF THE
GOALS 11/11/11

LOBBYING REPORT

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

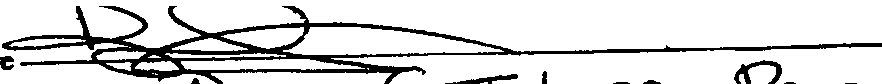
1. Registrant Name BARRY GOTTHEER, Gottheer and Company			
2. Address <input type="checkbox"/> Check if different than previously reported 719 Anboretum Drive, Wilmington, N.C. 28405			
3. Principal Place of Business (if different from line 2)			
City:	State/zip (or Country)		
4. Contact Name	Telephone	E-mail (optional)	5. Senate ID #
BARRY GOTTHEER	(910) 5099187	gottheernaude@aol.com	
7. Client Name <input type="checkbox"/> Self			6. House ID #
Baystate Health System			3330

TYPE OF REPORT 8. Year 2003 Midyear (January 1-June 30) OR Year End (July 1-D

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 Lobby

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13	
<p>12. Lobbying Firms</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> ⇔ \$ 80,000 Income (nearest \$20,000)</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>13. Organizations</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"/> ⇔ \$ _____ Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description of</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA def</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 1 Internal Revenue Code</p>

Signature



Date 8/5/03

Printed Name and Title

Barry Gottehrer, President

Registrant Name Gottlieb and Co. Client Name Baystate Health

Information Update Page - Complete ONLY where registration information has changed.

20. Client new address

21. Client new principal place of business (if different from line 20)

City

State/Zip (or 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

None

ISSUE UPDATE

24. General lobbying issues previously reported that no longer pertain

None

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal Place of (city and state or country)
<u>None</u>		

26. Name of each previously reported organization that is no longer affiliated with the registrant or client

None

FOREIGN ENTITIES

27. Add the following foreign entities

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities
<u>None</u>			

28. Name of each previously reported foreign entity that no longer owns, or controls, or is affiliated with the registrant or affiliated organization

[Signature]

Date 8/5/03

Signature

Printed Name and Title: Barry Gottehrer, President