

Clerk of the House of Representatives  
Legislative Resource Center  
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Washington, DC 20515

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SECRETARY OF THE SENATE

03 FEB 14 PM 3:03

**LOBBYING REPORT**

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

1. Registrant Name Holland & Knight LLP			
2. Address <input type="checkbox"/> Check if different than previously reported 2099 Pennsylvania Avenue, NW Suite 100 Washington, D.C. 20006			
3. Principal Place of Business (if different from line 2) City: Washington, DC State/Zip (or Country) 20006			
4. Contact Name Robert H. Bradner	Telephone 202-457-7004	E-mail (optional) rbradner@hkllaw.com	5. Senate ID 18466-990
7. Client Name <input type="checkbox"/> Self Carolinas HealthCare System			6. House ID 30825087

**TYPE OF REPORT** 8. Year 2002 Midyear (January 1- June 30)  OR Year End (July 1-Dece

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 Lobbyin

**INCOME OR EXPENSES - Complete Either Line 12 OR Line 13**

12. Lobbying Firms	13. Organization
<p><b>INCOME</b> 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"/> ⇒ \$ <u>40,000</u> 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><b>EXPENSES</b> relating to lobbying activities for the period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (near</p> <p><b>14. REPORTING METHOD.</b> Check box to indicate accounting method. See instructions for descriptive</p> <p><input type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA de</p> <p><input type="checkbox"/> <b>Method B.</b> Reporting amounts under section of the Internal Revenue Code</p> <p><input type="checkbox"/> <b>Method C.</b> Reporting amounts under section Internal Revenue Code</p>

Signature  \_\_\_\_\_

Printed Name and Title Robert H. Bradner, Partner \_\_\_\_\_

Registrant Name Holland & Knight LLP Client Name Carolinas HealthCare System

**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** information as requested. Attach additional page(s) as needed.

15. General issue area code BUD (one per page)

16. Specific lobbying issues

Providing federal policy assistance regarding discretionary appropriated funds.

17. House(s) of Congress and Federal agencies contacted  Check if None

U.S. House of Representatives  
U.S. Senate

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

Name	Covered Official Position (if applicable)
Robert H. Bradner	AA & Counsel, Honorable John Porter
Lisa Tofil	

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

*Robert H. Bradner*

Signature *Robert H. Bradner* Date 6/1

Printed Name and Title Robert H. Bradner, Partner

Registrant Name Holland & Knight LLP Client Name Carolinas HealthCare System

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which the registrant is engaged in lobbying on behalf of the client during the reporting period. **Using a separate page for each code** information as requested. Attach additional page(s) as needed.

15. General issue area code HCR (one per page)

16. Specific lobbying issues

Assist in monitoring and impacting health policy issues of concern to Health Care Providers.

17. House(s) of Congress and Federal agencies contacted  Check if None

U.S. House of Representatives  
U.S. Senate

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

Name	Covered Official Position (if applicable)
Robert H. Bradner	AA & Counsel, Honorable John Porter
Lisa Tofil	

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

*Robert H. Bradner*

Signature  Date           

Printed Name and Title Robert H. Bradner, Partner

Registrant Name Holland & Knight LLP Client Name Carolinas HealthCare System

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

20. Client new address

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

City \_\_\_\_\_ State/Zip (or County) \_\_\_\_\_

22. New general description of client's business or activities

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**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 affiliated organization(s)

Name	Address	Principal Place of Business (city and state or cc)


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

Name	Address	Principal Place of Business (city and state or country)	Amount of contribution for lobbying activities	Owners

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

Signature  Date 8-11-07

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