

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 SENATE  
 05 FEB 17 PM 2:

# LOBBYING REPORT

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

1. Registrant Name <u>John F. Troy</u>			
2. Address <input type="checkbox"/> Check if different than previously reported <u>11988 Colliers Reserve Drive</u>			
3. Principal Place of Business (if different from line 2) City: <u>Naples</u> State/Zip (or Country) <u>FL 34110</u>			
4. Contact Name <u>John F. Troy</u>	Telephone <u>202-626-9628</u>	E-mail (optional)	5. Senate ID <u>3854</u>
7. Client Name <input type="checkbox"/> Self <u>Blue Cross and Blue Shield Association</u>			6. House ID <u>337</u>

**TYPE OF REPORT** 8. Year 2004 Midyear (January 1-June 30)  OR Year End (July 1-12/31)

9. Check if this filing amends a previously filed version of this report

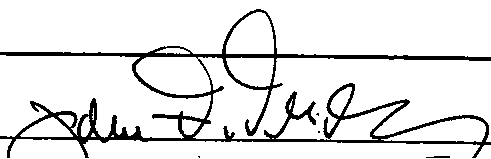
10. Check if this is a Termination Report  ⇒ Termination Date \_\_\_\_\_

11. No Lobbying

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

<p><b>12. Lobbying Firms</b></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"/> ⇒ \$ <u>100,000</u>  <small>Income (nearest \$20,000)</small></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>13. Organizations</b></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"/> ⇒ \$ _____  <small>Expenses (nearest \$20,000)</small></p> <p><b>14. REPORTING METHOD.</b> Check box to indicate accounting method. See instructions for description</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</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>
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Signature \_\_\_\_\_



Printed Name and Title John F. Tedy, Public Policy Consultant

LD-2 (REV. 6/98)

Registrant Name John F. Troy Client Name Blue Cross and Blue Shield

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which the 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 S-2163 Small Employer Health Benefit Plan  
HR 2698 - The Health Insurance Certificate Act  
S-100 Small Business Tax Credit Legislation  
HR-6601 HR 5481 - Small Business Health Fairness Act  
S-545 - Small Business Health Fairness Act  
Various Tax Incentive Proposals related to Health and  
Medicare Modernization Act Related Proposals/Regulations

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

Senate  
House of Representatives  
Department of Health and Human Services  
Department of Labor

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

Name	Covered Official Position (if applicable)
<u>John F. Troy</u>	

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

Signature *John F. Troy* Date 2/08/2005

Printed Name and Title JOAN L. ROY / Public Policy Consultant

Form LD-2 (Rev. 6/98)

Page 4