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LOBBYING REPORT

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

1. Registrant name						
Prefix	Mr.	First	Roberto A	Last	Gonzalez	
2. Address ☐ Check if different than previously reported						
10900 Patowmack Dr						
City	Great Falls	State	VA	Zip Code	22066	
					Country	US
3. Principal place of business (if different than line 2)						
City		State		Zip Code		
		State/Zip or Country		Country		
4a. Contact Name		b. Telephone number		c. E-mail		
Prefix	Full Name					
Mr.	Roberto A Gonzalez	703-282-5174		RAGonzalez2@aol.com		
7. Client Name ☐ Self					5. Senate ID #	
Medical Services International (MSI)					70494-1	
					6. House ID #	
					3563300	

TYPE OF REPORT 8. Year 2007 Midyear (January 1-June 30) ☒ OR Year End (July 1-December)

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 Act

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms INCOME relating to lobbying activities for this reporting period was: Less than \$10,000 ☐ \$10,000 or more ☒ ⇨ \$ <u>40,000</u> 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).	13. Organizations EXPENSES relating to lobbying activities for this reporting period were: Less than \$10,000 ☐ \$10,000 or more ☐ ⇨ \$ _____ 14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options. ☐ Method A. Reporting amounts using LDA definitions of ☐ Method B. Reporting amounts under section 6033(b)(8) Internal Revenue Code ☐ Method C. Reporting amounts under section 162(e) of Internal Revenue Code
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Form Co

Printed Name and Title Roberto A Gonzalez Principle

Registrant Name Roberto A GonzalezClient Name Medical Services International (MSI)

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 - Health Issues (one per page)

16. Specific lobbying issues

Add page to continue specific issues description for this issue

Special health care programs for Veteran & Military beneficiaries & their families & health informatics & hospital construction & state health funded programs.

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

United States Senate, House of Representatives, Department of Defense, Health & Human Services, Department of Veteran Affairs, & Department of Homeland Security.

18. Name of each individual who acted as a lobbyist in this issue area Add a page to continue adding lobbyists for

First Name	Name Last Name	Suffix	Covered Official Position (if applicable)
Roberto A	Gonzalez	Mr.	
James	Ramsey	Mr.	
Fergus	Ramsey	Mr.	

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

Add a page for a differ

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Printed Name and Title Roberto A Gonzalez Principle

LD-2DS (REV. 4/03)

Page 2

Registrant Name Roberto A Gonzalez Client Name Medical Services International (MSI)

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

20. Client new address

Address

City

State

Zip Code

Country

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

City

State

Zip Code

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

First Name

Last Name

Suffix

First Name

Last Name

S

1

3

2

4

ISSUE UPDATE

24. General lobbying issues that **no longer** pertain

Find the code to select below.

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal place of Business (city and state or country)
	Address	City
	C/S/Z	State
	Address	Country
	C/S/Z	City
		State

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

1

2

3

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	Own perc cler
	Street Address			
	City	State/Province Country		
		City		
		State		
		Country		

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

1

3

5

2

4

6

Add a page for more t

Printed Name and Title Roberto A Gonzalez Principle

