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LOBBYING REPORT

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

1. Registrant Name Triad Strategies, LLC			
2. Address <input type="checkbox"/> Check if different than previously reported 116 Pine Street, Fifth Floor Harrisburg, PA 17101			
3. Principal Place of Business (if different from line 2) City: _____ State/zip (or Country) _____			
4. Contact Name Jennifer M. Bertrand	Telephone (717) 238-2970	E-mail (optional) jbertrand@triadstrategies.com	5. Senate ID # 36036005
7. Client Name <input type="checkbox"/> Self PinnacleHealth System			6. House ID # 36036005

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


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>12. Lobbying Firms</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ _____ 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 reporting accounting method. See instructions for description of options.</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code</p>

Andrew H. ...

Signature  Date 01/31/2003

Printed Name and Title Jennifer M. Bertrand Associate

LD-2 (REV. 4/03)

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Registrant Name Triad Strategies, LLC Client Name PinnacleHealth System

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

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

16. Specific lobbying issues

Lobby members of PA Congressional delegation for assistance with funding of health care facilities.

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

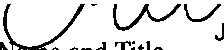
House of Representatives, Senate

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

Name	Covered Official Position (if applicable)
Martin D. Sellers	
Bradley P. Shopp	

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

Signature  Date 8/13/2003

 Printed Name and Title Jennifer M. Bertrand Associate

Form LD-2 (Rec. 4/03)

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