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## LOBBYING REPORT

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

	·
4. Contact Name Telephone 202-347	Zip (or Country) D. C. 2000    E-mail (optional) 5. Senate ID #
7. Client Name Self	
Children's Hospital & Regional	Medical Center 1971500
TYPE OF REPORT 8. Year 2002 Midyea	r (January 1-June 30) OR Year End (July 1-Dece
9. Check if this filing amends a previously filed version of this	
10. Check if this is a Termination Report □ ⇒ Termination	Date11. No Lobbying.
INCOME OR EXPENSES - Complete Either	Line 12 <b>OR</b> Line 13
12. Lobbying Firms	13. Organizations
<b>INCOME</b> relating to lobbying activities for this reporting period was:	<b>EXPENSES</b> relating to lobbying activities for this repo period were:
Less than \$10,000 \[ \square	Less than \$10,000 🗖
/ / / 0 000	\$10,000 or more  □
\$10,000 or more  \$\sim \sqrt{\text{LO}\text{OO}}\$   Income (nearest \$20,000)	Expenses (nearest \$2)  14. REPORTING METHOD. Check box to indicate (
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).	accounting method. See instructions for description of c
	☐ Method A. Reporting amounts using LDA definition
	☐ Method B. Reporting amounts under section 6033(
	Internal Revenue Code
	☐ Method C. Reporting amounts under section 162(e Internal Revenue Code
Signature CMO Julian	
Filing #d2c58831-eb31-466b-b710-5a9	TON 77A POECITENT

LD-2 (REV. 6/98) PAC

Registrant Name The Petrizzo Grap Clien	ni Name Children's Hospital
LOBBYING ACTIVITY. Select as many codes as necessaged in lobbying on behalf of the client during the reinformation as requested. Attach additional page(s) as no 15. General issue area code MMM (one per page)	porting period. Using a separate page for each code, eeded.
<b>D</b> · · · ·	proposed by Washing enters for Medicare & Media
	re&Medicuid Servic tatives
18. Name of each individual who acted as a lobbyist in t	his issue area
Thomas T.J. Petrizzo Kara Kennedy Shay Hancock Scott Lane	Covered Official Position (if applicable)
19. Interest of each foreign entity in the specific issues listed of	n line 16 above
Signature Sovo Sumo	Date 8-8-07
Printed Name and Title Filing #d2c58831-eb31-466b-b710-5a	trizzo, President a9fbd399806 - Page 3 of 8

	00020322720
Registrant Name The Petrizzo Grap CI	ient Name Children's Hospital
15. General issue area code (one per pa	ige)
16. Specific lobbying issues  State Children's Healt	th Insurance Program
17. House(s) of Congress and Federal agencies contact  House of Representations  Servette	ted Ocheck if None
18. Name of each individual who acted as a lobbyist in	n this issue area
Thomas T.J. "Petrizzo	Covered Official Position (if applicable)
Thomas I.J. Petrizzo	
Slave Fenneau	
Coally tomorga	<u></u>
Scott Lane	
19. Interest of each foreign entity in the specific issues listed	on line 16 above
Signe Strum	Data 8-8-02

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Printed Name and Title\_

Form LD-2 (Rev.6/98)

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	00020322721	
Registrant Name The Petrizzo Grap Clie	ent Name Children's Hospital	
LOBBYING ACTIVITY. Select as many codes as need engaged in lobbying on behalf of the client during the reinformation as requested. Attach additional page(s) as a	eporting period. Using a separate page for each code,	
15. General issue area code BUD (one per pag	ge)	
16. Specific lobbying issues Telemedicine	fording	
17. House(s) of Congress and Federal agencies contacted for the Representation of the Re		
18. Name of each individual who acted as a lobbyist in	this issue area	
Thomas T.J. "Petrizzo Kara Kennedy Shay Hancack Scot Lane	Covered Official Position (if applicable)	
19. Interest of each foreign entity in the specific issues listed	on line 16 above	
Sano Settim	Date 8-8-82	
Printed Name and Title Filing #d2c58831-eb31-466b-b710-5a9fbd399806 - Page 7 of 8		