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 SECRETARY OF THE SENS 04 FEB 13 PM 5: 1:

LOBBYING REPORT

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

| Registrant Name | |
|---|--|
| Cassidy & Associates, Inc. | |
| 2. Registrant Address | DC 20005 |
| 3. Principal Place of Business (if different from line 2) | |
| City ** Same as Above** State/Zip (or Country) | |
| 4. Contact Name Telep ione E- Arthur D. Mason | 5. Senate ID # |
| 7. Client Name Self | 6. House ID # |
| St. Joseph Regional Health Newtwork | 30223-388 |
| , , | |
| • | tion Date 11. No Lobbyir |
| 0. Check if this is a Termination Report □ >> Termina | tion Date 11. No Lobbyin |
| 0. Check if this is a Termination Report □ >> Termina INCOME OR EXPENSES - Complete Eit. | ner Line 12 OR Line 13 13. Organizations |
| 10. Check if this is a Termination Report □ >> Termina INCOME OR EXPENSES - Complete Eit. 12. Lobbying Firms INCOME relating to lobbying activities for this reporting | tion Date 11. No Lobbying activities for this report |
| 10. Check if this is a Termination Report □ >> Termina INCOME OR EXPENSES - Complete Eit. 12. Lobbying Firms INCOME relating to lobbying activities for this reporting period was: | 11. No Lobbying activities for this report period were: Less than \$10,000 \$10,000 or more >> \$ |
| INCOME OR EXPENSES - Complete Eit. 12. Lobbying Firms INCOME relating to lobbying activities for this reporting period was: Less than \$10,000 □ \$10,000 or more ⋈ >> \$ \$80,000.00 | 11. No Lobbying activities for this report period were: Less than \$10,000 \$10,000 or more \$Expenses (nearest \$20,000 |
| INCOME OR EXPENSES - Complete Eit. 12. Lobbying Firms INCOME relating to lobbying activities for this reporting period was: Less than \$10,000 □ \$10,000 or more ⋈ >> \$ \$80,000.00 | 11. No Lobbying ner Line 12 OR Line 13 13. Organizations EXPENSES relating to lobbying activities for this report period were: Less than \$10,000 \$10,000 or more \$\simeq \simeq \si |
| INCOME OR EXPENSES - Complete Eit. 12. Lobbying Firms INCOME relating to lobbying activities for this reporting period was: Less than \$10,000 □ \$10,000 or more ⋈ >> \$ \$80,000.00 | 11. No Lobbying ner Line 12 OR Line 13 13. Organizations EXPENSES relating to lobbying activities for this report period were: Less than \$10,000 \$10,000 or more \$\Bigsim \$\text{\$\t |

| Signature | MAN WAY | Date 2/13/2004 | |
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| J | | | |
| Printed Name and Title | Arthur D. Mason - Senior Vice President | | Page |

| Reg | istrant Name: | Cassidy & Associates, Inc. | | | |
|---|---|---|---|--|--|
| Clie | nt Name: | St. Joseph Regional Health Newtwork | | | |
| enga | iged in lobbyin | - | y to reflect the general issue areas in which the registrant ng period. Using a separate page for each code, provide d. | | |
| 15. | General issue | area code BUD (one per page) | | | |
| 16. Specific Lobbying issues H.R.2861/Senate, Departments of Veterans Affairs and Housing and Urban Development, and Independe Appropriations Act, 2004, S.1356, Departments of Labor, Health and Human Services, and Education, and Related Agencies Appre 2004, | | | | | |
| 17. | House(s) of C House of Rep Senate | Congress and Federal agencies contacted presentatives | ? □ Check if None | | |
| 18. | | individual who acted as a lobbyist in this | 1 | | |
| | Name | | Covered Official Position (if applicable) | | |
| | Evans, Chris | ty | | | |
| | Mason, Arth | ur D. | | | |
| | Muroff, Dan | | | | |
| | Riddick, Ble | nda | | | |
| | | | | | |
| 19. | Interest of eac | ch foreign entity in the specific issues liste | d on line 16 above 🛛 Check if None | | |

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| Signature | / MH-H ()·(1)/(A)() | Date | 2/13/2004 | |
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| | ווייטוין טוון א | | | |
| Printed Name and Title | Althur D. Mason - Senior Vice President | | | Page |

| Regi | strant Name: | Cassidy & | <u>Associates</u> | , Inc. | | |
|--|------------------|---------------|-------------------|----------------------|------------------------|--|
| Clie | nt Name: | St. Joseph | Regional I | Health Newtworl | ζ | |
| enga | ged in lobbyin | g on behalf o | f the client | | ing period. Using a se | l issue areas in which the registrant parate page for each code, provide |
| 15. General issue area code HCR (one per page) | | | | | | |
| 16. | Specific Lobb | ying issues | | | | |
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| | | | | | | |
| | | | | | | |
| 17. | House(s) of C | ongress and | Federal age | encies contacted | | ★ Check if None |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | * | |
| 18. | Name of each | individual w | ho acted as | s a lobbyist in this | issue area | |
| | Name | | | | Covered Official | Position (if applicable) |
| | Evans, Chris | ty | | | | |
| | Mason, Arth | ur D. | | | | |
| | Muroff, Dan | | | | | |
| | Riddick, Ble | nda | | | | |
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| | | | | | I | |
| 19. | Interest of each | ch foreign en | tity in the s | specific issues list | ed on line 16 above | |

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| Signature | (XIII) IVAN | Date 2/13/2004 | |
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| | MINT ALPHA | | - " |
| Printed Name and Title | Arthur D. Mason - Senior Vice President | | _ Page |

| Cassidy & Associates, Inc. | |
|---|--|
| St. Joseph Regional Health Newtwork | |
| | o reflect the general issue areas in which the registrant period. Using a separate page for each code, provide |
| e area code <u>HOU</u> (one per page) | |
| bying issues | |
| | |
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| | |
| Congress and Federal agencies contacted | ★ Check if None |
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| | |
| ch individual who acted as a lobbyist in this iss | ue area |
| | Covered Official Position (if applicable) |
| isty | |
| hur D. | |
| n | |
| enda | |
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| | |
| | St. Joseph Regional Health Newtwork FIVITY. Select as many codes as necessary to go on behalf of the client during the reporting uested. Attach additional page(s) as needed. The area code HOU (one per page) bying issues Congress and Federal agencies contacted the individual who acted as a lobbyist in this issues sty hur D. |

Filing #db826a84-7cc4-4c79-92e9-587babe5e532 - Page 7 of 12

| Signature | (ANTHUIVAN) | Date | 2/13/2004 | |
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| • | MINOTONIT | | | |
| Printed Name and Title | Arthur D. Mason - Senior Vice President | | | Page |

| Regi | istrant Name: | Cassidy & Ass | ociates, Inc. | | |
|--|---|--------------------|------------------------------|---|--|
| Clie | nt Name: | St. Joseph Reg | <u>ional Health Newtwork</u> | | |
| enga | iged in lobbying | g on behalf of the | | y to reflect the general issue areas in which the registrant ng period. Using a separate page for each code, provide d. | |
| 15. General issue area code TRA (one per page) | | | | | |
| 16. | Specific Lobb TEA-21 Reau | | | | |
| 17. | House(s) of C House of Rep Senate | | eral agencies contacted | ☐ Check if None . | |
| 18. | Name of each | individual who a | acted as a lobbyist in this | issue area | |
| | Name | | | Covered Official Position (if applicable) | |
| | Evans, Chris | ty | | | |
| | Mason, Arth | ur D. | | | |
| | Muroff, Dan | | | | |
| | Riddick, Bler | da | | | |
| | | | | | |
| 19. | Interest of eac | h foreign entity i | in the specific issues liste | d on line 16 above 🔀 Check if None | |

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| Signature | Jan Jan | Date | 2/13/2004 | |
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| C | | | | |
| Printed Name and Title | Arthur D. Mason - Senior Vice President | | | Page |

| | & Associates, Inc. | | |
|--|--------------------------------------|--|---|
| Client Name: St. Josep | h Regional Health Newtwork | <u> </u> | |
| Information Update l | Page - Complete ONLY whe | ere registration information has | changed. |
| 20. Client new address | | | |
| 21. Client new principal place of | business (if different from line 20) | | |
| City | State/Zip (or Country) | | |
| 22. New general description of cl | ient's business or activities | | |
| LOBBYIST UPDATE 23. Name of each previous Muroff, Dan | ly reported individual who is no | o longer expected to act as a lobby | yist for the client |
| | s previously reported that no lo | nger pertain | |
| AFFILIATED ORGAN 25. Add the following affil | | | |
| Name | | Address | Principal Place of Bus (city and state or cour |
| 26. Name of each previous | ly reported organization that is | no longer affiliated with the regis | trant or client |
| FOREIGN ENTITIES 27. Add the following fore | ign entities | | |
| Name | Address | Principal Place of Business (city and state or country) | Amount of contribution for lobbying activities |
| 28. Name of each previous or affiliated organization | • • | o longer owns, or controls, or is a | affiliated with the registran |

| Signature | KLANKY WYNN | Date | 2/13/2004 | |
|------------------------|---|------|-----------|------|
| J | Arthur D. Mason - Senior Vice President | | | |
| Printed Name and Title | AN that D. Wason - Semon vice Tresident | | | Page |