

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  
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# LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration  1. Effective Date of Registration 08/01/2006  
 2. House Identification Number 36234 Senate Identification Number 81156-004

## REGISTRANT

3. Registrant name Mr. Jon Christensen  
 Address 117 2nd Street NE, Suite 200  
 City Washington State DC Zip 20002 US  
 4. Principal place of business (if different than line 3)  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 5. Telephone number and contact name  
615-477-3195 Contact Mr. Jon Christensen E-mail jonlc@united.net  
 6. General description of registrant's business or activities  
Lobbying

**CLIENT** *A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should check the box labeled "Self" and proceed to line 10.*  Self

7. Client name University of Pittsburgh Medical Center  
 Address 200 Lothrop Street  
 City Pittsburgh State PA Zip 15213 US  
 8. Principal place of business (if different than line 7)  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 9. General description of client's business or activities  
General Health Care

## LOBBYISTS

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any person listed in this section has served as a "covered executive branch official" or "covered legislative branch official" within two years of first becoming a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

Name	Covered Official Position (if applicable)
Jon Christensen	N/A

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Registrant Name Jon Christensen

Client Name University of Pittsburgh Medical Center

### LOBBYING ISSUES

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1, pag

GOV      MMM      ENV      \_\_\_\_\_

12. Specific lobbying issues (current and anticipated)

- Reimbursement of Oncology costs/pharmaceuticals
- CMS/HHS
- Imaging reductions
- Monitoring legislation/environmental issues

### AFFILIATED ORGANIZATIONS

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the registrant in a semiannual period and in whole or in major part plans supervises or controls the registrant's lobbying activities?

No ⇒ Go to line 14.

Yes ⇒ Complete the rest of this section for each entity matching criteria above, then proceed to line 14.

Name	Address	Principal place of Business (city and state or country)

### FOREIGN ENTITIES

14. Is there any foreign entity that:

- a) holds at least 20% equitable ownership in the client or any organization identified on line 13; **OR**
- b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or subsidizes ac the client or any organization identified on line 13; **OR**
- c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in the outcome o lobbying activity?

No ⇒ Sign and date the registration.

Yes ⇒ Complete the rest of this section for each entit; matching the criteria above, then sign and date registration.

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	C p

**Edit Form >** **File wit**  
 Senate Password  **File wit**

Signature Jon L Christensen Date 8/30/2006

Printed Name and Title Jon L. Christensen, Attorney at Law

Digitally signed by Jon L Christensen  
DN: cn=Jon L Christensen, c=US, o=DST Aces  
Unaffiliated Individual  
Date: 2006.08.30.15:19:00-0500

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Registrant Name Jon Christensen

Client Name University of Pittsburgh Medical Center

**ADDITIONAL LOBBYISTS**

10 Supplemental. List any additional lobbyists for this client not listed on page 1, number 10.

Name	Covered Official Position (if applicable)

**ADDITIONAL LOBBYING ISSUES**

11 Supplemental. General lobbying issue areas. Enter any additional codes for issues not listed on page 2, number 11.

**AFFILIATED ORGANIZATIONS**

13 Supplemental. List any other affiliated organization that meets the criteria specified and is not listed on page 2, number 13.

Name	Address	Principal place of Business (city and state or country)

**ADDITIONAL FOREIGN ENTITIES**

14 Supplemental. List any other foreign entity that meets the criteria specified and is not listed on page 2, number 14.

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	percent

Signature Document digitally signed on Page 2. Date 8/30/2006  
Printed Name and Title Jon L. Christensen, Attorney at Law

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