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Legislative Resource Center
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Washington, DC 20515

Secretary of the Senate
Office of Public Records
232 Hart Building
Washington, DC 20510

SECRETARY OF THE SENATE

00 AUG 14 PM 3:20

LOBBYING REPORT

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

1. Registrant Name Holland & Knight LLP			
2. Address <input type="checkbox"/> Check if different than previously reported 2100 Pennsylvania Ave., NW, Suite 400			
3. Principal Place of Business (if different from line 2) City: Washington State/Zip (or Country): DC 10057-3202			
4. Contact Name Marianne Poss	Telephone (202)828-5011	E-mail (optional) mposs@hklaw.com	5. Senate ID # 18466-24
7. Client Name <input type="checkbox"/> Self Allina Health Systems			6. House ID # 20825-042

TYPE OF REPORT 8. Year 2000 Midyear (January 1- June 30) ☒ OR Year End (July 1-December 31) ☐

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 Activity ☐

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms	13. Organization
INCOME relating to lobbying activities for this reporting period was: Less than \$10,000 <input type="checkbox"/> \$10,000 or more <input checked="" type="checkbox"/> ⇒ \$ <u>20,000</u> <small>Income (nearest \$20,000)</small> 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).	EXPENSES relating to lobbying activities for this reporting period were: Less than \$10,000 <input checked="" type="checkbox"/> \$10,000 or more <input type="checkbox"/> ⇒ \$ _____ <small>Expenses (nearest \$20,000)</small> 14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options. <input type="checkbox"/> Method A. Reporting amounts using LDA definitions only <input type="checkbox"/> Method B. Reporting amounts under section 6053(b)(8) of the Internal Revenue Code <input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code

Signature Marianne Poss

Printed Name and Title Marianne Poss, Executive Assistant

Page 1 of 2

Registrant Name Holland & Knight LLP Client Name Allina Health Systems

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

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

16. Specific lobbying issues

Federal government relations advice in connection with public health issues, medicare, medicaid, patients' rights.

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

The House of Representatives
The Senate
Health and Human Services

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

Name	Covered Official Position (if applicable)	New
Gerry E. Sikorski, Partner		<input type="checkbox"/>
Patricia Jo Toker, Legislative Assistant		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

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

Signature Marianne Poss Date 8/14/02

Printed Name and Title Marianne Poss, Executive Assistant

WAS1 #861102v1

Page 2 of 2

Registrant Name Holland & Knight LLP Client Name Allina Health Systems

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

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

16. Specific lobbying issues

Federal government relations advice in connection with public health issues, medicare, medicaid, patients' rights.

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

The House of Representatives
The Senate
Health and Human Services

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

Name	Covered Official Position (if applicable)	New
Gerry E. Sikorski, Partner		<input type="checkbox"/>
Patricia Jo Toker, Legislative Assistant		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

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

Signature Marianne Poss Date 8/14/00

Printed Name and Title Marianne Poss, Executive Assistant

WASL 0901102v1

Page 2 of 2