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LOBBYING REPORT

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

1. Registrant name			
Organization		IKON Public Affairs	
2. Address <input type="checkbox"/> Check if different than previously reported			
Address 1 1101 30th Street, NW, Suite 220			
City	Washington	State	DC
		Zip Code	20007
			Country US
3. Principal place of business (if different than line 2)			
City		State	
		Zip Code	
			Country
4a. Contact Name		b. Telephone number	c. E-mail
Prefix	Full Name		
Ms.	Corrin McKay	202-337-6600	
7. Client Name <input type="checkbox"/> Self			5. Senate ID #
Valleywide Healthcare			6. House ID #
			33638054

TYPE OF REPORT 8. Year 2005 Midyear (January 1-June 30) OR Year End (July 1-December)

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	
<p>12. Lobbying Firms</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> ⇔ \$ <u>20,000</u></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 were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇔ \$ _____</p> <p>14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definitions only</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) of Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Revenue Code</p>

Form Con

Printed Name and Title Craig Snyder, Managing Partner

1000412476

Registrant Name IKON Public Affairs Client Name Valleywide Healthcare

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

15. General issue area code BUD - Budget/Appropriations (one per page)

16. Specific lobbying issues *Add page to continue specific issues description for this issue*

Labor HHS Appropriations

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

US House of Representatives, US Senate

18. Name of each individual who acted as a lobbyist in this issue area *Add a page to continue adding lobbyists for !!*

First Name	Name Last Name	Suffix	Covered Official Position (if applicable)
Dominic	DelPapa		
Craig	Snyder		
Brian	Aiello		District Director for Rep. Tim Murphy
Peter	Grollman		

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

Add a page for a differe

Printed Name and Title Craig Snyder, Managing Partner

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