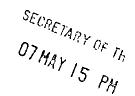
clerk of the House of Representatives Legislative Resource Center B-106 Cannon Building Washington, DC 20515

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



## LOBBYING REPOR

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

| 1. Registrant Name   Organization   Individual Ogilvy Government Relations   |   |   |  |  |                         |   |   |
|--|---|---|--|--|-------------------------|---|---|
| 2. Address Check if different than previously reported Address 1111 19th Street, NW  | l<br>Address2   | Suite 1   | 100                                    |  |                         |   |   |
| City Washington State  | DC  | Zip   | Code                                   | 2003   | 6                       | •   | Count   |
| 3. Principal place of business (if different than line 2)  |   | •   |  |  | •                       |   |   |
| City State   |   | Zip   | Code                                   |  |                         | -   | Count   |
| 4a. Contact Name  b. Telephone Number  International Number  |   |   |  |  |                         |   | 5. Senat  |
| Ms. WAYNE BERMAN (202) 729-4200  | abby.bobr   | @ogilvyg  | gr.com                                 |  |                         |   | 48827   |
| 7. Client Name Self  AMERICA'S HEALTH INSURANCE PLANS (AHIP)   |   |   |  |  |                         |   | 6. House 34528                                      |
| O. Check if this filing amends a previously filed version of this report   |   | 2005  |  | 1  | 1. No                   | o Lobbyi  | ng Activi   |
| O. Check if this filing amends a previously filed version of this report   | 05/01/2   |   |  | 1  | 1. No                   | o Lobbyi  | ng Activi   |
| O. Check if this filing amends a previously filed version of this report  10. Check if this is a Termination Report  Termination Da  INCOME OR EXPENSES - Complete Either Line  12. Lobbying   | 05/01/2<br>12 OR Li   | ine 13  | ing to                                 | 13.  | Orga                    | ınizatio  | ns  |
| O. Check if this filing amends a previously filed version of this report  10. Check if this is a Termination Report  Termination Da  INCOME OR EXPENSES - Complete Either Line   | 05/01/2   | ine 13  | ing to                                 | 13.  | Orga                    | ınizatio  | ns  |
| O. Check if this filing amends a previously filed version of this report  10. Check if this is a Termination Report  INCOME OR EXPENSES - Complete Either Line  12. Lobbying  INCOME relating to lobbying activities for this reporting period   | 12 OR Li  | ine 13<br>SE relat                                    | ing to                                 | 13.  | Orga                    | ınizatio  | ns  |
| O. Check if this filing amends a previously filed version of this report  10. Check if this is a Termination Report  11. Lobbying  12. Lobbying  INCOME relating to lobbying activities for this reporting period was:   | 12 OR Li EXPENS were:   | ine 13 SE relat                                       | _                                      | 13.  | Orga                    | ınizatio  | ns  |
| P. Check if this filing amends a previously filed version of this report 10. Check if this is a Termination Report 17. Termination Da INCOME OR EXPENSES - Complete Either Line 12. Lobbying  INCOME relating to lobbying activities for this reporting period was:  Less than \$10,000  | 12 OR Li EXPENS were: Less than   | SE relates \$10,000 to more                           |  | 13.<br>lobbyi<br>\$  | Orga                    | anization<br>ctivities<br>ck box to                           | ns<br>for this re                                   |
| O. Check if this filing amends a previously filed version of this report to the complete the com | EXPENS were: Less than: \$10,000 or 14. REP accounting                      | SE relates \$10,000 to more                           | iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii | 13.<br>lobbyi<br>\$<br>e instr   | Orgaing ac              | anization<br>ctivities<br>ck box to<br>ns for de              | ns<br>for this re                                   |
| P. Check if this filing amends a previously filed version of this report 10. Check if this is a Termination Report 17. Termination Da INCOME OR EXPENSES - Complete Either Line 12. Lobbying  INCOME relating to lobbying activities for this reporting period was:  Less than \$10,000  | EXPENSIVE Less than 12 OR Li  EXPENSIVE Less than 12 14. REPaccounting Meth | SE related SIO.000 to more ORTIN ng meth              | G sod. Se Report                       | 13. lobbyi \$ se instring amo  | Orga                    | anization<br>ctivities<br>ck box to<br>ns for de<br>using LDA | for this re   |
| O. Check if this filing amends a previously filed version of this report to the complete the com | EXPENS were: Less than: \$10,000 or 14. REP accounting Meth                 | SE relates \$10,000 to more ORTIN ng method A.        | G od. Se Report Report Interna         | 13. lobbyi  se instring amount ing amount in a mount in | Orga Checuctio ounts to | ctivities  ck box to  ns for de  using LDA                    | for this re   |
| P. Check if this filing amends a previously filed version of this report 10. Check if this is a Termination Report  Termination Da INCOME OR EXPENSES - Complete Either Line  12. Lobbying  INCOME relating to lobbying activities for this reporting period was:  Less than \$10,000    \$10,000 or more  \$40,000.00  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  | EXPENS were: Less than: \$10,000 or 14. REP accounting Meth                 | SE relates \$10,000 or more ORTIN ng method A. nod B. | G od. Se Report Report Interna         | 13. lobbyi  se instring amoing | Orga Checuctio ounts to | ctivities  ck box to  ns for de  using LDA                    | for this re<br>indicate<br>escription<br>definition |

| LOBBYING ACTIVITY. Se                       | elect as many codes as necessary                                       | to reflect    | the general issue areas in which the registrant |
|---|--|---------------|---|
|   | f of the client during the reporting the additional page(s) as needed. |               | Using a separate page for each code, provide    |
|   | <b>}.</b>  |               |   |
| 15. General issue area code                 | MMM Medicare/Medic   | caid          | (one per page)                                  |
| 16. Specific lobbying issues                |  |               |   |
| Issues related to regulations a             | and legislation affecting Medica                                       | re.           |   |
| 17. House(s) of Congress and                | l Federal agencies ☐ Che   | ck if None    | e 🗸 House 🗸 Senate 🗌                            |
| 18. Name of each individual v               | who acted as a lobbyist in this iss                                    | sue area      | Covered Official Position (if applicable)       |
| <b></b>                                     | Name   | G., 6C.,      | Covered Official Position (if applicable)       |
| First Wayne                                 | Last Berman  | Suffix        |   |
| Chris                                       | Giblin   | <u>][]</u>    | Chief of Staff, Congressman John Carter         |
| John  | Green  | <u>  </u><br> | Chief of Others, Congressment Form              |
|   |  |               |   |
| Stewart                                     | Hall   |               |   |
|   |  |               |   |
|   |  |               |   |
|   |  |               |   |
|   |  |               |   |
|   |  |               |   |
| 19 Interest of each foreign e               | ntity in the specific issues listed                                    | on line 16    | above ♥ Check if None                           |
| 1,7,2,1,0,1,0,1,0,1,0,1,0,1,0,1,0,1,0,1,0,1 |  |               |   |
|   |  |               |   |
|   |  |               |   |
|   |  |               |   |
|   |  |               |   |
|   |  | •             |   |
|   |  |               |   |
|   | <b></b>  |               |   |
| Printed Name and Title St                   | ewart Hall, Managing Director  |               |   |

| m |  |
|---|--|

3666666423

v5.0.0j

Printed Name and Title Stewart Hall, Managing Director

A Company of the Comp