

## SECRETARY OF THE COMMONWEALTH LOBBYIST REGISTRATION FORM (Rev. 4/05)

Please send the original and a copy with a \$50.00 registration fee, made Payable to the Treasurer of Virginia to:

Secretary of the Commonwealth Attn: Lobbyist Specialist 1111 E. Broad St 4<sup>th</sup> Floor Richmond, Virginia 23219

FOR OFFICE U	SE ONLY	
Principal Notification	n Date	
Date Received		
Foo Poid: Chock #	Cach	

(1) PRINCIPAL:	Virginia Hospital & Healthcare Association
(1a) What type of business is the p	rinciple engaged in:
	Trade association of hospitals and health systems.
Officer of Principal authorizing you may not appear in items 2 and 5 of t	r employment as a lobbyist, or to whom your expenditures will be reported. <i>The same name his form.</i>
(2) Name:	Sean T. Connaughton
(2a) Business Address:	P.O. Box 31394 Richmond, VA 23294-1394
(2b) Business Telephone:	804-965-1352
	<b>ALL</b> records, in behalf of the principal, with respect to your lobbying activities for their ly stored in another location, please so indicate in the space provided by item 3c.
(3) Name:	R. Brent Rawlings
(3a) Business Address:	P.O. Box 31394 Richmond, VA 23294-1394
	804-965-1228
(3c) Business Address/Telephone i	number of location where records are stored:
	4200 Innslake Drive Suite 203, Glen Allen, VA 23260
	804-965-1216

(4) Please list the full name(s), business address(es), and telephone number(s) of all other individual(s) that are registered to lobby in behalf of the *PRINCIPAL* listed in item 1 of your registration form.

Sean T. Connaughton, same 804-965-1352 Robert Brent Rawlings, same 804-965-1228 Christopher S. Bailey, same 804-965-1207 Sara Hendon Heisler, same 804-965-1249 Matthew Strader, same 804-965-1221 Jennifer Wicker, same 804-965-1213 Dave Nutter, same 804-366-6814 Thelma Drake, same 804-366-6130 Janet Kelly, same 804-238-4814

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(5) LOBBYIST:	Sara Hendon Heisler
(5a) Business Addres	P.O. Box 31394 Richmond, VA 23294-1394
	one:
(5c) E-Mail Address	sheisler@vhha.com
	etain ALL records, on behalf of the lobbyist, with respect to your lobbying activities for the afore-designated re physically stored in another location, please so indicate in the space provided in item 7d.
(6) Name:	Robert Brent Rawlings
	P.O. Box 31394 Richmond, VA 23294-1394
(6b) Business Teleph	one:
	ss/Telephone number of location where records are stored: 4200 Innslake Drive Suite 203, Glen Allen, VA 23060
	804-965-1216
	pose for which you expect to lobby: (be as specific as possible in this response) ted to hospitals and healthcare.
(8) As a lobbyist, you	are: (check one)
<b>Employed</b>	(Lobbyist is on payroll of principal)
☐ Retained	(Lobbyist is not on payroll of principal, but is compensated)
Not Com	pensated (Lobbyist is not compensated, but expenses may be reimbursed)
(9) If you are <i>employ</i>	ed either part-time or full-time by the principal, please give your job title:
	Associate General Counsel
	signed lobbyist, do state that the information furnished on this registration statement and on any and tements attached thereto, is to the best of my knowledge and belief, complete and accurate.
	17/2015 Lobbyist's Signature: Sara Hendon Heisler (Electronically Signed: 4/17/2015 1:20:16 P