

LOBBYING REPORT

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

1. Registrant Name:

CELGENE CORP

2. Address:

30 TECHNOLOGY DRIVE, WARREN, NJ 07059

3. Principal place of business (if different from line 2):

4. Contact Name: EILEEN FINNEGAN

Telephone: 301-657-1150

E-mail (optional): efinnegan@celgene.com

Senate ID #: 62893-12

House ID #: 35486000

7. Client Name: Self

TYPE OF REPORT

8. Year 2004 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: Aug 01, 2004 11. No Lobbying Activity:

INCOME OR EXPENSES

Complete Either Line 12 **OR** Line 13

12. Lobbying Firms

INCOME relating to lobbying activities for this reporting period was:

Less than \$10,000:

\$10,000 or more: => Income (nearest \$20,000): _____

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).

13. Organizations

EXPENSES relating to lobbying activities for this reporting period were:

Less than \$10,000:

\$10,000 or more: => Expenses (nearest \$20,000): 36,000.00

14. Reporting Method.

Check box to indicate expense accounting method. See instructions for description of options.

Method A. Reporting amounts using LDA definitions only

Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code

Method C. Reporting amounts under section 162(e) of the Internal Revenue Code

Registrant Name: CELGENE CORP Client Name: Self

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: HCR (one per page)

16. Specific lobbying issues:

17. House(s) of Congress and Federal agencies contacted: **None**

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

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

Registrant Name: CELGENE CORP Client Name: Self

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: MED (one per page)

16. Specific lobbying issues:

17. House(s) of Congress and Federal agencies contacted: **None**

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

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

Registrant Name: CELGENE CORP Client Name: Self

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:

Medicare coverage for oral anti-cancer drugs

17. House(s) of Congress and Federal agencies contacted:

Centers For Medicare and Medicaid Services (CMS)

HOUSE OF REPRESENTATIVES

SENATE

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

Name: FINNEGAN, EILEEN

Covered Official Position (if applicable): N/A

Name: GOSS, ELISABETH

Covered Official Position (if applicable): N/A

Name: TURNER, SAM

Covered Official Position (if applicable): N/A

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

Registrant Name: CELGENE CORP Client Name: Self

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:

17. House(s) of Congress and Federal agencies contacted:

Centers For Medicare and Medicaid Services (CMS)

HOUSE OF REPRESENTATIVES

SENATE

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

Name: FINNEGAN, EILEEN

Covered Official Position (if applicable): N/A

Name: GOSS, ELISABETH

Covered Official Position (if applicable): N/A

Name: TURNER, SAM

Covered Official Position (if applicable): N/A

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

Registrant Name: CELGENE CORP Client Name: Self

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: VET (one per page)

16. Specific lobbying issues:

17. House(s) of Congress and Federal agencies contacted: **None**

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

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

Signature: ON FILE Date: Aug 02, 2004

Printed Name and Title: EILEEN FINNEGAN - EXECUTIVE DIRECTOR, GOVERNMENT AFFAIRS

Registrant Name: CELGENE CORP Client Name: Self

Information Update Page:

Complete **ONLY** where registration information has changed.

LOBBYIST UPDATE

23. Name of each previously reported individual who is **NO LONGER** expected to act as a lobbyist for the client

Name: FINNEGAN, EILEEN

Name: GOSS, ELISABETH

Name: TURNER, SAM

ISSUE UPDATE

24. General lobbying issues previously reported that **NO LONGER** pertain

HCR MED MMM VET

AFFILIATED ORGANIZATIONS

25. Add the following organization(s)

26. Name of each previously reported organization that is **NO LONGER** affiliated with the registrant or client

FOREIGN ENTITIES

27. Add the following foreign entities

28. Name of each previously reported foreign entity the **NO LONGER** owns, **OR** controls, **OR** is affiliated with the registrant, client or affiliated organization

Signature: ON FILE Date: Aug 02, 2004

Printed Name and Title: EILEEN FINNEGAN - Ex. Director, Gov't Affairs