

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
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SECRETARY C
03 FEB -5**LOBBYING REPORT**

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

1. Registrant Name MYERS, JAMES PIERCE			
2. Address <input checked="" type="checkbox"/> Check if different than previously reported 1211 CONNECTICUT NW, SUITE 610, WASHINGTON, DC 20036			
3. Principal Place of Business (if different from line 2) City: SAME State/Zip (or Country)			
4. Contact Name PIERCE MYERS	Telephone (202) 331-8315	E-mail (optional) jpm@piercemyers.com	5. Senate ID # 263
7. Client Name <input type="checkbox"/> Self PRESTON GATES ELLIS & ROUVÉLAS MEEDS			6. House ID # 3391

TYPE OF REPORT 8. Year 2002 Midyear (January 1-June 30) OR Year End (July 1-Dec)
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 **INCOME OR EXPENSES - Complete Either Line 12 OR Line 13**

<p align="center">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>80,000.00</u> Income (nearest \$20,000)</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 align="center">13. Organizations</p> <p>EXPENSES relating to lobbying activities for this reporting period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD: Check box to indicate accounting method. See instructions for description of</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162 Internal Revenue Code</p>
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Signature

James P. Myers

Printed Name and Title

JAMES PIERCE MYERS, ATTORNEY

Registrant Name MYERS, JAMES PIERCE Client Name PRESTON GATES ELLIS & ROUVELAS ME

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 code information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

Legislation affecting postal rates and fees; postal appropriations; postal reform legislation; mail security and technology; Postal Service pension funding; President's Commission on the Postal Service.

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

U.S. Senate; U.S. House of Representatives; U.S. Postal Service; Postal Rate Commission

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

Name	Covered Official Position (if applicable)
MYERS, JAMES PIERCE	N/A

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

Signature *James P. Myers* Date 1/23/02

Printed Name and Title JAMES PIERCE MYERS, ATTORNEY

Registrant Name MYERS, JAMES PIERCE Client Name PRESTON GATES ELLIS & ROUVELAS ME

Information Update Page - Complete ONLY where registration information has changed.

20. Client new address _____
21. Client new principal place of business (if different from line 20)
 City _____ State/Zip (or Country) _____
22. New general description of client's business or activities _____

LOBBYIST UPDATE

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

ISSUE UPDATE

24. General lobbying issues previously reported that **no longer** pertain _____

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal Place of Bus (city and state or cou
MAGAZINE PUBLISHERS OF AMERICA	919 3RD AVE, 22ND FLOOR	NEW YORK, NY, 10022

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

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	C P C
NONE				

28. Name of each previously reported foreign entity that **no longer** owns, or controls, or is affiliated with the registrant, affiliated organization
 NONE

Signature *James P. Myers* Date 1/23/02
 Printed Name and Title JAMES PIERCE MYERS, ATTORNEY

