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Legislative Resource Center  
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Washington, DC 20515

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Washington, DC 20510

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# LOBBYING REPORT

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

1. Registrant Name <b>Bergner, Bockorny, Castagnetti, Hawkins &amp; Brain</b>			
2. Registrant Address <input type="checkbox"/> Check if different than previously reported Address <b>1101 16th Street, N.W. Suite 500</b> City <b>Washington</b> State/Zip (or Country) <b>DC 20036 USA</b>			
3. Principal Place of Business (if different from line 2) City _____ State/Zip (or Country) _____			
4. Contact Name <b>Charles Brain</b> Telephone _____ E-mail (optional) _____			5. Senate ID # <b>6006-1472</b>
7. Client Name <input type="checkbox"/> Self <b>PhRMA</b>			6. House ID # <b>31317098</b>

**TYPE OF REPORT** 8. Year 2003 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

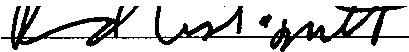
10. Check if this is a Termination Report  >> Termination Date \_\_\_\_\_

11. No Lobbying

## INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p align="center"><b>12. Lobbying Firms</b></p> <p><b>INCOME</b> 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"/> &gt;&gt; \$ <u>\$40,000.00</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"><b>13. Organizations</b></p> <p><b>EXPENSES</b> 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"/> &gt;&gt; \$ _____ Expenses (nearest \$20,000)</p> <p><b>14. REPORTING METHOD.</b> Check box to indicate reporting accounting method. See instructions for description of method.</p> <p><input type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definitions</p> <p><input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 6033(c) of the Internal Revenue Code</p> <p><input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162(e) of the Internal Revenue Code</p>
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*M. D. T. D.*

Signature  Date 7-28-2003

Printed Name and Title David Castagnetti - Managing Partner Page

Registrant Name: **Bergner, Bockorny, Castagnetti, Hawkins & Brain**

Client Name: **PhRMA**

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**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  
**Medicare Prescription Drug Benefit and importation of prescription drugs**

- 17. House(s) of Congress and Federal agencies contacted  Check if None  
**House of Representatives**  
**Senate**

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

Name	Covered Official Position (if applicable)
<b>Brain, Charles</b>	
<b>Castagnetti, David</b>	
<b>Hutton, Michael</b>	<b>Chief of Staff</b>
<b>Schulman, Melissa</b>	
<b>Shearer, P. Scott</b>	

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

Signature \_\_\_\_\_ Date **7-28-2003**

Printed Name and Title **David Castagnetti - Managing Partner** \_\_\_\_\_ Pag