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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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LOBBYING REPORT

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

1. Registrant Name INFECTIOUS DISEASES SOCIETY OF AMERICA (IDSA)	
2. Address <input type="checkbox"/> Check if different than previously reported 99 CANAL CENTER PLAZA, SUITE 210	
3. Principal Place of Business (if different from line 2) City: ALEXANDRIA State/Zip (or County) VA 22314	
4. Contact Name Robert J. Guidas	5. Senate ID # 54836-12
Telephone 703-299-0202	E-mail (optional) R.Guidas@idsa.org
7. Client Name <input checked="" type="checkbox"/> Self	6. House ID # 35089000

TYPE OF REPORT 8. Year 2000 Midyear (January - 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 Activity

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13	
<p>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 type="checkbox"/> ⇒ \$ _____ 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>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 checked="" type="checkbox"/> ⇒ \$ <u>30,000.00</u> Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options.</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definitions only</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code</p> <p><input checked="" type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code</p>

Signature _____

Printed Name and Title _____

Registrant Name IDSA Client Name IDSA

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) (OTC - FDA PART 15 HEARING)
(Letter to FDA/CVM on risk assessment)
16. Specific lobbying issues
HEALTH ISSUES
ANTIBIOTIC RESISTANCE (GENERAL) (FIRST MEETING ON S. 2731)
ANTIBIOTIC SHORTAGES (MEETING IN OCTOBER w/ FDA, CDC)
CLINICAL LABORATORY IMPROVEMENT ACT (FDA, CDC, HCFA)
(GRAMSTAIN)
VACCINES (NUII program - meeting w/ Frist staff)
Condom Labeling (Frist staff / CHAFFS STAFF)
17. House(s) of Congress and Federal agencies contacted Check if None
FDA; CDC; HCFA
SENATOR FRIST + KENNEDY
HOUSE (condom labeling, VACCINE/AUTISM HEARING)

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

Name	Covered Official Position (if applicable)	New
Robert J. Gvidas	Director of Public Policy	<input type="checkbox"/>
MARK LEASURE	Executive Director, IDSA	<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

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

Signature _____ Date _____
 Printed Name and Title _____

Registrant Name IDSA Client Name IDSA

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)
MEDICAL / DISEASE RESEARCH / CLINICAL LABS

16. Specific lobbying issues
CLIA (CLINICAL LABORATORY IMPROVEMENT ACT)
GRAM STAIN
RESEARCH (INTERNATIONAL - FORBETT INTERNATIONAL CENTER - NIH)
LETTERS TO APPROPRIATES

17. House(s) of Congress and Federal agencies contacted Check if None
FDA, CDC, HCFR
SENATE & HOUSE

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

Name	Covered Official Position (if applicable)	New
<u>Robert J. Gvidos</u>	<u>Director of Public Policy</u>	<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

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

Signature _____ Date _____

Printed Name and Title _____

Registrant Name IDSA Client Name IDSA

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)

MEDICARE / MEDICAID

16. Specific lobbying issues

Antimicrobial Infusion Therapy coverage

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

HEFA

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

Name	Covered Official Position (if applicable)	New
<u>Robert J. Gaidos</u>	<u>Director of Public Policy</u>	<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

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

Signature _____ Date _____

Printed Name and Title _____

Registrant Name IDSA Client Name IDSA

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 SCI (one per page)
SCIENCE / TECHNOLOGY

16. Specific lobbying issues
Federal Advisory Committee Act
(VACCINES ADVISORY COMM:ITEES)
[SKFEN letter]

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

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

Name	Covered Official Position (if applicable)	New
<u>Robert J. Gidos</u>	<u>Director of Public Policy</u>	<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

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

Signature _____ Date _____

Printed Name and Title _____

Registrant Name IDSA Client Name IDSA

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 FOO (one per page)
FOOD INDUSTRY (SAFETY, LABELING)

16. Specific lobbying issues
IRRADIATION
ANTIMICROBIAL RESISTANCE / FOOD ANIMAL DRUG ISSUES

17. House(s) of Congress and Federal agencies contacted Check if None
CPSM / FDA - through common with the NATIONAL
(CUM) - ANTIMICROBIAL RESISTANCE FOOD PROCESSORS ASSOCIATION

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

Name	Covered Official Position (if applicable)	New
Robert J. Gidos	Director of Public Policy	<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

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

Signature _____ Date _____

Printed Name and Title _____

Registrant Name LDSA Client Name LDSA

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 AGR (one per page)
AGRICULTURE

16. Specific lobbying issues

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

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

Name	Covered Official Position (if applicable)	New
<u>Robert J. Guides</u>	<u>Director of Public Policy</u>	<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

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

Signature _____ Date _____
Printed Name and Title _____

Registrant Name IDS A Client Name IDS A

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 CSP (one per page)
CONSUMER ISSUES / SAFETY / PROTECTION

16. Specific lobbying issues
THERE ARE NONE IN ADDITIONAL TO THOSE LISTED UNDER:
"FOO"; "SCI"; "MED"; "MMM"; "HER" PAGES

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

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

Name	Covered Official Position (if applicable)	New
<u>Robert J. Guidos</u>	<u>Director of Public Policy</u>	<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

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

Signature *Robert J. Guidos* Date 7/26/00
Printed Name and Title Robert J. Guidos

Jeff Trandahl
Clerk

H-154 The Capitol

Office of the Clerk
U.S. House of Representatives
Washington D.C. 20515-6601

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

JAN 10 4 12 PM '01

MR. ROBERT J. GUIDOS
INFECTIOUS DISEASES SOCIETY OF AMERICA
99 CANAL CENTER PLAZA, #210
ALEXANDRIA, VA 22314

January 10, 2001

ID: 35089000

The Lobbying Disclosure Act of 1995 (2 USC 1601) directs the Clerk of the House of Representatives to "review, and, where necessary, verify and inquire to ensure the accuracy, completeness and timeliness of registrations and reports".

A preliminary review of your 2000 Mid-Year Report filed with the Office of the Clerk indicates the following omissions and/or errors:

- Line 18 should be completed on each legislative page.

Please file an amended Report Form correcting these omission(s) and/or error(s) within thirty days, with the Legislative Resource Center, B106 Cannon House Office Building, Washington, D.C. 20515. Line numbers referenced in this notice refer to forms LD-1 and LD-2 dated June, 1998.

If you have any questions regarding this matter, please do not hesitate to contact the Legislative Resource Center at (202) 226-5200.

**Please Note: The law requires a separate filing with the Secretary of the Senate.*

attached
amended Rpt