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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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SECRETARY OF THE
OFFICE OF PUBLIC RECORDS
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LOBBYING REPORT

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

| | | | |
|---|--|-------------------|----------------|
| 1. Registrant Name American Society of Consultant Pharmacists | | | |
| 2. Address <input type="checkbox"/> Check if different than previously reported 1321 Duke Street | | | |
| 3. Principal Place of Business (if different from line 2) City: Alexandria State/Zip (or Country) Virginia 22314 | | | |
| 4. Contact Name | Telephone | E-mail (optional) | 5. Senate ID # |
| Thomas R. Clark | 703/739-1316, ext. 123 | tclark@ascp.com | 3446-12 |
| 7. Client Name | <input checked="" type="checkbox"/> Self | | 6. House ID # |

TYPE OF REPORT 8. Year 2004 Midyear (January 1-June 30) OR Year End (July 1-Decen

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>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>80,000</u> Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate reporting 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(c) Internal Revenue Code</p> <p><input checked="" type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code</p> |
|---|---|

Signature _____

Registrant Name ASCP Client Name SELF

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the registrant is 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 MMM (one per page)

16. Specific lobbying issues

Medicare Drug Benefit

-impact on long term care

-impact on pharmacy; formulary restrictions

-Medication Therapy Management Services

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

Senate

House of Representatives

HHS

CMS

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

| Name | Covered Official Position (if applicable) |
|-----------------|---|
| Thomas R. Clark | |
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19. Interest of each foreign entity in the specific issues listed on line 16 above Check if None

Signature *Thomas R. Clark* Date 1/6/05

Printed Name and Title Thomas R. Clark, Director of Policy and Advocacy

Registrant Name ASCP 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, information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

Medication Therapy Management Services
-component of Medicare Modernization Act

Payment for Pharmacist Services under Medicare Part B
-H.R. 4724, sponsored by Representative Burr (NC)

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

Senate
House of Representatives
HHS
CMS

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

| Name | Covered Official Position (if applicable) |
|-----------------|---|
| Thomas R. Clark | |
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19. Interest of each foreign entity in the specific issues listed on line 16 above Check if None

Signature *TRC* Date 1/6/05

Printed Name and Title Thomas R. Clark, Director of Policy and Advocacy

Registrant Name ASCP Client Name SELF

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

20. Client new address

n/a

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

n/a

LOBBYIST UPDATE

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

n/a

ISSUE UPDATE

24. General lobbying issues previously reported that no longer pertain

n/a

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s) n/a

| Name | Address | Principal Place of Business (city and state or country) |
|------|---------|---|
| n/a | | |

26. Name of each previously reported organization that is no longer affiliated with the registrant or client

n/a

FOREIGN ENTITIES

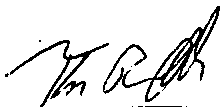
27. Add the following foreign entities n/a

| Name | Address | Principal place of business (city and state or country) | Amount of contribution for lobbying activities |
|------|---------|---|--|
| n/a | | | |

28. Name of each previously reported foreign entity that no longer owns, or controls, or is affiliated with the registrant or affiliated organization

n/a

Signature



Date

1/6/05

