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LOBBYING REPORT

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

1. Registrant Name Powell, Goldstein, Frazer & Murphy, LLP			
2. Address <input type="checkbox"/> Check if different than previously reported 1001 Pennsylvania Avenue, N.W., 6th Floor, Washington, D.C. 20004			
3. Principal Place of Business (if different from line 2) City: <u>N/A</u> State/Zip (or Country) _____			
4. Contact Name Michael Fine	Telephone (202) 347-0066	E-mail (optional)	5. Senate ID # 31942-1077
7. Client Name <input type="checkbox"/> Self Memorial Sloan-Kettering			6. House ID # 31255092

TYPE OF REPORT 8. Year 2002 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">12. Lobbying Firms</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input checked="" 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 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 accounting method. See instructions for description</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 1 Internal Revenue Code</p>
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Signature Katie Horton

Printed Name and Title **Katie Horton, Senior Policy Advisor**

Form LD-2 (REV. 6/98)

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