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LOBBYING REPORT

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

1. Registrant Name Cassidy & Associates, Inc.	
2. Address <input type="checkbox"/> Check if different than previously reported 700 Thirteenth Street, NW, Suite 400 Washington DC 20005	
3. Principal Place of Business (if different from line 2) City ** Same as Above** State/Zip (or Country)	
4. Contact Name Jeffrey Lawrence	5. Senate ID # 8453-1611
7. Client Name <input type="checkbox"/> Self ALCON LABORATORIES, INC.	6. House ID # 30223158

8. Year 2000 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 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 checked="" type="checkbox"/> >> \$ <u>\$100,000.00</u> <small>Income (nearest \$20,000)</small></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 type="checkbox"/> >> \$ _____ <small>Expenses (nearest \$20,000)</small></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)(5) of the Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code</p>

Signature *Jeffrey Lawrence* Date 2/14/2001

Printed Name and Title Jeffrey Lawrence - Senior Vice President Page 1 of 3

Registrant Name: Cassidy & Associates, Inc.

Client Name: ALCON LABORATORIES, INC.

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
H.R.4576/S.7593, Department of Defense Appropriations Act, 2001, Increase use of excimer laser

17. House(s) of Congress and Federal agencies contacted
Department of Defense
House of Representatives
Senate 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>Lawrence, Jeffrey</u>		<u>No</u>
<u>Versage, Vincent M.</u>		<u>No</u>
<u>Pinto, Brenda</u>	<u>Chief Legis. Correspondent, Ofc of Sen. Lautenberg</u>	<u>No</u>

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

Signature  Date 2/14/2001

Printed Name and Title Jeffrey Lawrence - Senior Vice President Page 2 of 3

Registrant Name: Cassidy & Associates, Inc.

Client Name: ALCON LABORATORIES, INC.

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

20. Client new address
6201 South Freeway, , Fort Worth, TX, 76134 USA
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

25. Name of each previously reported individual who is no longer expected to act as a lobbyist for the client
Versage, Vincent M.

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 Business (city and state or country)

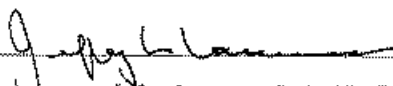
26. Name of each previously reported organization that is no longer affiliated with the registrant or client _____

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	Ownership % in client

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

Signature  Date 2/14/2001
Printed Name and Title Jeffrey Lawrence - Senior Vice President Page 3 of 3