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LOBBYING REPORT

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

1. Registrant Name Sagamore Associates			
2. Registrant Address <input checked="" type="checkbox"/> Check if different than previously reported Address 805 15th Street, NW Suite 700 City Washington, State/Zip (or Country) DC 20005 USA			
3. Principal Place of Business (if different from line 2) City _____ State/Zip (or Country) _____			
4. Contact Name Margaret Walker		Telephone 202-312-7400	E-mail (optional) _____ 5. Senate ID # 34158-532
7. Client Name <input type="checkbox"/> Self Indiana Medical Device Manufacturers Council, Inc.		6. House ID # 30124045	

TYPE OF REPORT 8. Year 1999 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	
12. Lobbying Firms	13. Organizations
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating to lobbying activities for this reporting period were:
Less than \$10,000 <input type="checkbox"/>	Less than \$10,000 <input type="checkbox"/>
\$10,000 or more <input checked="" type="checkbox"/> >> \$ <u>\$40,000.00</u> Income (nearest \$20,000)	\$10,000 or more <input type="checkbox"/> >> \$ _____ Expenses (nearest \$20,000)
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).	14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options. <input type="checkbox"/> Method A. Reporting amounts using LDA definitions only <input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code <input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code

Signature _____ Date 2/11/2000

Printed Name and Title Mark Weller - Senior Vice President Page 1 of 3

Registrant Name: Sagamore Associates

Client Name: Indiana Medical Device Manufacturers Council, 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 MMM (one per page)

16. Specific Lobbying issues

Medicare Coverage Policy for Diagnostic Medical Devices, H.R. 2356 Patient Appeals Act of 1999

Medicare coding and payment issues

Medicare coverage process reform

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)	New
Weller, Mark		No

19. Interest of each foreign entity in the specific issues listed on line 16 above

☒ Check if None

Signature _____ Date 2/11/2000

Printed Name and Title Mark Weller - Senior Vice President Page 2 of 3

Registrant Name: Sagamore Associates

Client Name: Indiana Medical Device Manufacturers Council, Inc.

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

20. Client new address

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

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

Wasitis, Douglas

McCormack, Douglas

ISSUE UPDATE

24. General lobbying issues previously reported that **no longer** pertain

MED

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal Place of Business (city and state or country)

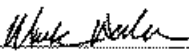
26. Name of each previously reported organization that is **no longer** affiliated with the registrant or client

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 2/11/2000

Printed Name and Title Mark Weller - Senior Vice President Page 3 of 3