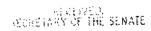


Clerk of the House of Representative Legislative Resource Center B-106 Cannon Building Washington, DC 20515 Secretary of the Senate Office of Public Records 232 Hart Building Washington, DC 20510



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## LOBBYING REPORT

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

Van Scoyor Associates, Inc.	
2. Registrant Address	Suite 1050 DC 20005 USA
Principal Place of Business (if different from line 2)	
City State/Zip (or Country)	
4. Contact Name Telephone E-m Anita Estell 202-638-1950	enii (optionai) 5. Senate U) #
Citent Name (1) Self Bristol-Myers Squibb	6. Etouse ED #
. Check if this is a Termination Report 🗍> Terminati	on Date II. No Lobbying Activi
NCOME OR EXPENSES - Complete Eithe	er Line 12 OR Line 13
INCOME OR EXPENSES - Complete Either 12. Lobbying Firms	er Line 12 OR Line 13  13. Organizations
12. Lobbying Firms  INCOME relating to lobbying activities for this reporting	
f2. Lobbying Firms  INCOME relating to lobbying activities for this reporting period was:	13. Organizations  EXPENSES relating to lobbying activities for this reporting
#2. Lobbying Firms  INCOME relating to lobbying activities for this reporting period was:  Less than \$10,000 [2]	13. Organizations  EXPENSES relating to lobbying activities for this reporting period were:  Less than \$10,000 ( )  \$10,000 or more
#2. Lobbying Firms  INCOME relating to lobbying activities for this reporting period was:  (.ess than \$10,000 (*)  \$10,000 or more	13. Organizations  EXPENSES relating to lobbying activities for this reporting period were:  Less than \$10,000 ( )  \$10,000 or more ( ) >> \$  Expenses (nearest \$20,000)  14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options.
F2. Lobbying Firms  INCOME relating to lobbying activities for this reporting period was:  (.ess than \$10,000 (*)  \$10,000 or more	13. Organizations  EXPENSES relating to lobbying activities for this reporting period were:  Less than \$10,000 ( )  \$10,000 or more   >> 5  Expenses (nearest \$20,000)  14. REPORTING METHOD. Check box to indicate expense
INCOME relating to lobbying activities for this reporting period was:  Less than \$10,000   \$10,000 or more \$\frac{\times}{2} >> \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	13. Organizations  EXPENSES relating to lobbying activities for this reporting period were:  Less than \$10,000 (

200000	tol-Myers Squibb	Le reflect the annual insue area is which the second	
engaged in lobbying on t		to reflect the general issue areas in which the registrant ng period. Using a separate page for each code, provide	
15. General issue area o			
<ol> <li>Specific Lobbying i Minority Health Is</li> </ol>	issues		
17. House(s) of Congre	ss and Federal agencies contacted	X Check if None	
18. Name of each indiv	idual who acted as a lobbyist in this	issue area	
<ol> <li>Name of each indiv</li> <li>Name</li> </ol>	idual who acted as a lobbyist in this	issue area  Covered Official Position (if applicable)	New
	idual who acted as a lobbyist in this		New No
Name			
Name Estell, Anita	y		No
Name Estell, Anita Johnson, Kimberly	y		No No
Name Estell, Anita Johnson, Kimberly	y		No No
Name Estell, Anita Johnson, Kimberly	y		No No
Name Estell, Anita Johnson, Kimberly	y		No No
Name  Esteil, Anita  Johnson, Kimberly  Van Scoyoc, H. Ste	y	Covered Official Position (if applicable)	No No
Name  Esteil, Anita  Johnson, Kimberly  Van Scoyoc, H. Ste	y -wart	Covered Official Position (if applicable)	No No

Client Name:	Bristol-Myers Squibb		
engaged in lobbyí	ng on behalf of the client durin uested. Attach additional page	s as necessary to reflect the general issue areas in which the registrant ag the reporting period. Using a separate page for each code, provid (s) as needed.	
<ol><li>General issue</li></ol>		ne per page)	
<ol><li>Specific Lob</li></ol>	bying issues		
Minority	Health Issues		
17. House(s) of (	Congress and Federal agencies	contacted X Check if None	
18. Name of eac	h indivídual who acted as a lob	obyist in this issue area	
<ol> <li>Name of each</li> <li>Name</li> </ol>	h individual who acted as a lob	obyist in this issue area  Covered Official Position (if applicable)	Nev
Name			Nev   No
Name Estell, Anita			
Name Estell, Anita Johnson, Ki	mberly		No No
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Name Estell, Anita Johnson, Ki	mberly	Covered Official Position (if applicable)	No No
Name Estell, Anita Johnson, Kl	mberly	Covered Official Position (if applicable)	No No
Name  Estell, Anita  Johnson, Ki  Van Scoyoe.	mberly H. Stewart	Covered Official Position (if applicable)	No No

Page 3 of 3

Printed Name and Title Anita Estell Vice President