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LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration

1. Effective Date of Registration April 1, 20

2. House Identification Number _____

Senate Identification Number _____

REGISTRANT

3. Registrant name Sidley Austin Brown & Wood LLP

Address 1501 K Street, NW

City Washington

State DC

Zip 20005

4. Principal place of business (if different from line 3)

City _____

State/Zip (or Country) _____

5. Telephone number and contact name

(202) 736-8344

Contact Simon Lazarus

E-mail (optional) _____

6. General description of registrant's business or activities

law firm

CLIENT *A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should check labeled "Self" and proceed to line 10.* Self

7. Client name SonoSite, Inc.

Address 21919 30th Drive, SE

City Bothell

State WA

Zip 98021

8. Principal place of business (if different from line 7)

City same

State/Zip (or Country) _____

9. General description of client's business or activities

technology products

LOBBYISTS

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any person in this section has served as a "covered executive branch official" or "covered legislative branch official" within two years acting as a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

Name	Covered Official Position (if applicable)
<u>William Sarraille</u>	
<u>Simon Lazarus</u>	
<u>Anna Spencer</u>	
<u>Alice Slayton Clark</u>	

Lauren Roth

Form LD-1 (Rev. 06/98)

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Registrant Name Sidley Austin Brown & Wood LLP Client Name SonoSite, Inc.

LOBBYING ISSUES

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1, p

MMM

12. Specific lobbying issues (current and anticipated)

Medicare coverage for ultrasound services

AFFILIATED ORGANIZATIONS

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the reg a semiannual period and in whole or in major part plans, supervises or controls the registrant's lobbying act

No ⇨ Go to line 14.

Yes ↓ Complete the rest of this section for each entity m the criteria above, then proceed to line 14.

Name	Address	Principal Place of Busine (city and state or count

FOREIGN ENTITIES

14. Is there any foreign entity that:

- a) holds at least 20% equitable ownership in the client or any organization identified on line 13; **OR**
- b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or su activities of the client or any organization identified on line 13; **OR**
- c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in the of the lobbying activity?

No ⇨ Sign and date the registration.

Yes ↓ Complete the rest of this section for each matching the criteria above, then sign ar registration.

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities

Signature *[Handwritten Signature]* Date 5/1/13

Printed Name and Title William Sarraille, Partner

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