

LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration

1. Effective Date of Registration Dec 08, 2005

2. House Identification Number _____

Senate Identification Number 35230-1546

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: CHICAGO State/Zip(or Country): IL 60603

5. Telephone number and contact name:
202736-8228 Contact: PATRICK MORRISEY
E-mail(optional): pmorrisey@sidley.com

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 the box labeled "Self" and proceed to line 10.

Self

7. Client name: BRIDGE RX NFP
Address: 1501 K STREET NW, SABW 708
City: WASHINGTON State: DC Zip: 20005

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

9. General description of client's business or activities:
Coalition Patient Assistance Program

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 listed in this section has served as a "covered executive branch official" or "covered legislative branch official" within two years of first acting as a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

Name: MORRISEY, PATRICK
Covered Official Position (if applicable): DEP. STAFF DIRECTOR HOUSE ENERGY & COMMERCE COMMITTEE
Name: RAZDR, JENNIFER
Covered Official Position (if applicable): N/A
Name: TYNDALL, MARK
Covered Official Position (if applicable): PROF. STAFF, SEN. AGRICULTURE COMM.

LOBBYING ISSUES

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

PHA

12. Specific lobbying issues (current and anticipated):

Matters involving the development of coalition model patient assistance programs under Medicare Part D.

AFFILIATED ORGANIZATIONS

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the registrant in a semi-annual

Registrant Name: SIDLEY AUSTIN BROWN & WOOD LLP Client Name: BRIDGE RX NFP

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

No, then go to line 14.

Yes, then complete the rest of this section for each entity matching the criteria above, then proceed to line 14.

Name: ABBOTT LABORATORIES
Address: 200 ABBOTT PARK ROAD, ABBOTT PARK, IL, 60064, U.S.A.
Principal Place of Business (city and state or country):
Address: 200 ABBOTT PARK ROAD, ABBOTT PARK, IL, 60064, U.S.A.

Name: ASTRAZENECA PHARMACEUTICALS
Address: 1800 CONCORD PLACE, WILMINGTON, DE, 19850, UNITED KINGDOM
Principal Place of Business (city and state or country):
LONDON

Name: BRISTOL-MYERS SQUIBB COMPANY
Address: 777 SCUDDERS MILL ROAD, PLAINSBORO, NJ, 08536, U.S.A.
Principal Place of Business (city and state or country):
Address: 777 SCUDDERS MILL ROAD, PLAINSBORO, NJ, 08536, U.S.A.

Name: JOHNSON & JOHNSON HEALTH CARE
Address: 425 HOES LANE, PISCATAWAY, IL, 08855, U.S.A.
Principal Place of Business (city and state or country):
Address: 425 HOES LANE, PISCATAWAY, IL, 08855, U.S.A.

Name: NOVARTIS PHARMACEUTICALS
Address: ONE HEALTH PLAZA, EAST HANOVER, NJ, 07936, SWITZERLAND
Principal Place of Business (city and state or country):
BASEL

Name: TAP PHARMACEUTICALS
Address: 675 NORTH FIELD DRIVE, LAKE FOREST, IL, 60045, U.S.A.
Principal Place of Business (city and state or country):
LAKE FOREST, IL

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 subsidizes 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 outcome of the lobbying activity?

No, then sign and date the registration.

Yes, then complete the rest of this section for each entity matching the criteria above, then sign and date the registration.

Name: ASTRAZENECA PLC
Address: 15 STANHOPE GATE, LONDON
Principal Place of Business (city and state or country): LONDON, UNITED KINGDOM
Amount of contribution for lobbying activities: UNAVAILABLE
Ownership percentage in client: UNAVAILABLE

Name: NOVARTIS PHARMA
Address: LICHTSTRASSE 35, BASEL
Principal Place of Business (city and state or country): BASEL, SWITZERLAND
Amount of contribution for lobbying activities: UNAVAILABLE
Ownership percentage in client: UNAVAILABLE

Signature: ON FILE Date: Dec 08, 2005

Printed Name and Title: PATRICK MORRISEY - PARTNER