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LOBBYING REPORT

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

1. Registrant Name <u>WASHINGTON CAPITAL GROUP</u>			
2. Address <input type="checkbox"/> Check if different than previously reported <u>1701 K ST N.W. #300</u>			
3. Principal Place of Business (if different from line 2) City: <u>WASHINGTON</u> State/Zip (or Country) <u>DC 20006-1522</u>			
4. Contact Name <u>JOHN H. FOREHAND III</u>	Telephone <u>202-223-1103</u>	E-mail (optional)	5. Senate ID #
7. Client Name <input type="checkbox"/> Self <u>SMITH & NEPHEW</u>	6. House ID #		

TYPE OF REPORT 8. Year 2005 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 Activities

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms
INCOME relating to lobbying activities for this reporting period was:
Less than \$10,000
\$10,000 or more ⇨ \$ _____
Income (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).

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 accounting method. See instructions for description of options.
 Method A. Reporting amounts using LDA definitions
 Method B. Reporting amounts under section 6033(b) Internal Revenue Code
 Method C. Reporting amounts under section 162(e) Internal Revenue Code

1000093122

Signature [Handwritten Signature]

Printed Name and Title ^v JOHN H FOREHAND, III, PRINCIPAL

LD-2 (REV. 5/98)

PAGE 1

Registrant Name WASHINGTON CAPITOL GROUP Client Name SMITH + NEPHEW

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the registrant is engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code information as requested. Attach additional page(s) as needed.

15. General issue area code HHS (one per page)

16. Specific lobbying issues

HEALTH CARE RELATED PRODUCT ISSUES

17. House(s) of Congress and Federal agencies contacted

Check if None

U.S. HOUSE OF REPRESENTATIVES

U.S. SENATE

DEPT OF HEALTH AND HUMAN SERVICES, AND HEALTH CARE RELATED AGENCIES

18. Name of each individual who acted as a lobbyist in this issue area

Name	Covered Official Position (if applicable)
<u>John H. FOREHAND III</u>	

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

Check if None

0000093123

Signature _____

Date _____

Printed Name and Title JOHN H. FOREHAND, III, EXEC. VICE PRESIDENT

Form LD-2 (Rev. 6/98)

Page _____