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

LOBBYING REPORT

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

| 1. Registrant name | | | | | |
|---|--|---------------------------|--|--|--|
| Organization GolinHarris | | | | | |
| 2. Address Check if different than previously reported | | | | | |
| 2200 Clarendon Blvd. | Suite 1100 | | | | |
| City Arlington State V | A Zip Code 22201 | Country US | | | |
| 3. Principal place of business (if different than line 2) | | ••••• | | | |
| | Zip Code p or Country | Country | | | |
| City State/Zi 4a. Contact Name b. Telephone number Prefix Full Name | c. E-mail | 5. Senate ID# | | | |
| · · · · · · · · · · · · · · · · · · · | on@golinharris.com | 34023-11 | | | |
| 7. Client Name Self Bristol-Myers Squibb Company | | 6. House ID # 3221407 | | | |
| 10. Check if this is a Termination Report □ □ Termination Date INCOME OR EXPENSES - Complete Either Line 12 | | -, | | | |
| 12. Lobbying Firms | 13. Organi | -, | | | |
| INCOME relating to lobbying activities for this reporting period was: | EXPENSES relating to lobbying activities for this reportin were: | | | | |
| Less than \$10,000 | Less than \$10,000 | | | | |
| \$10,000 or more 🔀 🖒 \$ 40,000 | \$10,000 or more | | | | |
| Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income from the client (including all | 14. REPORTING METHOD. Check box to indicate expeaceounting method. See instructions for description of opti | | | | |
| payments to the registrant by any other entity for lobbying activities on behalf of the client). | Method A. Reporting amounts using LDA definitions o Method B. Reporting amounts under section 6033(b)(8 Internal Revenue Code | | | | |
| | Method C. Reporting amount Revenue Code | s under section 162(e) of | | | |
| | | Form Co | | | |

Printed Name and Title C. Michael Fulton, Executive Vice President Filing #43a53eac-3c8c-4414-8ecd-41e9f94556ab - Page 1 of 6 LD-2DS (Rev. 4/03)

L'Mechael Sutton 7/26/05

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| Registrant Name GolinHarris | | | Client Name Bristol-Myers Squibb Company | | | | |
|-----------------------------------|---|-----------------------|---|--|--|--|--|
| engaged in lobb | | lient during the | necessary to reflect the general issue areas in which the reporting period. Using a separate page for each cod as needed. | | | | |
| 15. General issu | te area code HCR - Ho | ealth Issues | (one per page) | | | | |
| 16. Specific lob | bying issues | | Add page to continue specific issues description for this issue | | | | |
| Hepatitis B / | of H. Resolution 250 and Awareness Week." Congress and Federal | | 117, designating the week of May 9 as "National cted Check if None | | | | |
| House Senate 18. Name of ea | ch individual who acte | ed as a lobbyist | in this issue area Add a page to continue additing lobbyists for t | | | | |
| First Name Michael | Name Last Name Fulton | Suffix M r. | Covered Official Position (if applicable) | | | | |
| Erin | Buechel | Ms. | | | | | |
| Marianne | Adezio | Ms. | Rep. Todd Platts | | | | |
| 19. Interest of e | ach foreign entity in t | he specific issu | es listed on line 16 above \times Check if None | | | | |

Printed Name and Title C. Michael Fulton, Executive Vice President

LD-2DS (REV. 4/03)

C Michael Gutton

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| Registrant Name GolinHa | rris | | | Client | Name_ | Bristol-M | yers Squit | ob Company | |
|---|------------------------|------------------|---|--|----------------------------|---|----------------------|------------------------------------|-------------------|
| Information Upda | te Page - | Complete | e ONLY v | vhere reg | istrati | on infor | mation h | as changed | l. |
| 20. Client new address | | | | | ٠., | | | | |
| City | | | :. | State | | Zip Code | | Country | , |
| 21. Client new principal | place of busin | ness (if diffe | erent than li | ne 20) | ., | ******** | ,,,,,, | | |
| City | | | | State | : | Zip Code | | Country | <i>,</i> , |
| 22. New general descrip | tion of client's | s business o | r activities | | | | | | |
| | | <u> </u> | : :::: <u></u> | | <u>:</u> | " | | | ٠ |
| LOBBYIST UPDATE 23. Name of each prev | | ted individ | ual who is | no longer | expect | ed to act | as a lobby Last N | ist for the cli | ent s |
| 1 | | | | 3 | ÷ . | # # # | | | |
| 2 | | • . | | 4 | · | # * | | | |
| ISSUE UPDATE | | | | ······································ | Find th | o code to | select be | lovi | |
| 24. General lobbying i | ssues that no | longer pe | ertain | | i iiiQ ui | e code lo | select be | | |
| | : | | **** ********************************* | | | e j | | | |
| AFFILIATED ORG 25. Add the following | | | s) | | | | | | |
| Name | | Address | | | ,,,,, | Principal place of Busines (city and state or countr | | | |
| | | Address | | • | • | . i | City | | |
| • | | C/S/Z | | | | | State | Coun | itry |
| • | | Address C/S/Z | | • | | | City State | | |
| 26. Name of each prev | iously repor | ted organiz | zation that | is no long | er affili | iated with | the regist | rant or client | |
| 1 | | 2 | ! | | ar Latin t | 3 | | | |
| FOREIGN ENTITE 27. Add the following | | ies | | | | | | | |
| Name | Street Address City | | rovince Countr | (city ar | al place of nd state or | | 4 | of contribution ying activities | Ow per clie |
| | | | | City | | | | | |
| | | | | State | Cou | ntry | | | |
| 28. Name of each previous | | foreign ent | ity that no l | onger own | s, <u>or</u> cor | itrols, <u>or</u> i | s affiliated | with the regist | trant, |
| affiliated organization | n | [3] | | | | Γ | 5] | | |
| <u>1</u> | | 의 4 | | * * | | _ | 6 | | |

Add a page for more c

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