Cterk of the House of Representatives 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

H. D.

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

t. Registrant Name Parry and Romani Associates, Inc.)	
2. Registrant Address	DC 20002 USA	
Principed Place of Business (if different from line 2) City State/Zip (or Country)		
4. Contact Name Felephone E-mail Edward Baxter 202-547-4000	d (optional)	5. Senate 1D # 30792-428
7. Client Name Self Pfizer, Inc.	:	6. House (D 4
. Check if this filing amends a previously filed version of the 0. Check if this is a Termination Report [] >> Termination INCOME OR EXPENSES - Complete Either	n Date	11. No Lobbying Activity (
12. Lobbying Firms	13. Organizar	tions
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating to lobbying activ period were:	ities for this reporting
Less than \$10,000 💢	Less than \$10,000 [
\$10,000 or more \$2 >> \$ \$60,000.00	\$10,000 or more S >> \$ 14. REPORTING METHOD. Check accounting method. See instructions for	
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).	☐ Method A. Reporting amounts us	ing LDA definitions only
	the Internal Revenue to Method C. Reporting amounts un Internal Revenue Cod	Code der section 162(e) of the
Signature	Date 08/11/	1999
Printed Name and Title Romano Romani - President		Page 1 of 7

	Client I	vane:	Pffzer, Inc.	WAS WATER TO THE TOTAL THE TOTAL TO THE TOTA	
	engage	in lobbyir	_	s as necessary to reflect the general issue areas in which the registrant ng the reporting period. Using a separate page for each code, provide e(s) as needed.	
	15. G	eneral issue	e area code <u>CPT</u> (o	one per page)	
1			bying issues form of P.L.98-417, The Dru	g Competition & Patent Term Restoration Act of 1984.,	
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	12 H		Danamana and Ekadanal acception	The Charlest State	
			Congress and Federal agencies of Commerce: Patent and T		
	H	ouse of Re	presentatives		
	Se	nate			
				• .	
	18. N	ime of each	n individual who acted as a lot	bbyist in this issue area	
				} a	1
	N	me '		Covered Official Position (if applicable)	Nev
		xter, Edw	ard	· · · · · · · · · · · · · · · · · · ·	No
	Đ;	ıvis, Shanz	30B		No
	De	Concini, I	Dennis		No
	М	artin, šacl	4		No
	Po	rry, Thon			
					No
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	R	mani, Ro	ntano	1. 3. 3.	No
,.	R		ntano		
	R	mani, Ro	ntano		No
	R _i	smani, Roi Jadany, Li	inda	c iccure ligrad on line 16 above.	No
	R _i	smani, Roi Jadany, Li	inda	c issues listed on line 16 above 📉 Check if None	No
	R _i	smani, Roi Jadany, Li	inda	c issues listed on line 16 above 💢 Check if None	No
	R _i	smani, Roi Jadany, Li	inda	c issues listed on line 16 above 📉 Check if None	No
	R/Sk	amani, Roi Jadany, Li	inda		No
	Sk Sk Sk Signatu	smani, Roi Jadany, Li Jerest of eac	inda	Date 98/11/1999	No

ngaged in lobbying aformation as requ 5. General issue: 6. Specific Lobby	g on behalf of the client during the reporting ested. Attach additional page(s) as needed area code HCR (one per page)	r to reflect the general issue areas in which the registrant ng period. Using a separate page for each code, provide	
ngaged in lobbying aformation as requ 5. General issue: 6. Specific Lobby	g on behalf of the client during the reporting ested. Attach additional page(s) as needed area code HCR (one per page) ying issues	ng period. Using a separate page for each code, provide	
6. Specific Lobby	ying issues	·	
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	:		
7. House(s) of Co	ongress and Federal agencies contacted	☑ Check if None	
	· · ·		
Name of each	individual who acted as a lobbyist in this i	issue area	
Name		Covered Official Position (if applicable)	New
NONE,			No
	·		
·····			
<u> </u>	·		
			<u> </u>
	•		
9. Interest of eac	h foreign entity in the specific issues listed	on line 16 above X Check if None	
		Date 08/11/1999	
73 mts 0		note 08/11/1999	

Regi	istrant Name:	Parry and Romani Associates, Inc.		
Clie	nt Name:	Pfizer, Inc.		
enga	iged in Johbyin		effect the general issue areas in which the registrant cried. Using a separate page for each code, provide	-
15.	General issue	area code MED (one per page)		
16.	Specific Lobb Oppose legisl		nt for doctor prescribed medically necessary viagra.	
	Legislation to	enact a medicare prescription drug benefit		
17,	House(s) of C	ongress and Federal agencies contacted	M Check if None	
18.	Name of each	individual who acted as a lobbyist in this issue	area	
	Name		Covered Official Position (if applicable)	New
	Baxter, Edwi	ırd		No
	Davis, Shane	OD-		No
	DeConcini, D	enbis		No
	Hatch, Scott			Na
	Martin, Jack			No
	NONE,			No
_	Parry, Thom	95		No
		:		
19.	Interest of eac	h foreign entity in the specific issues listed on	ine 16 above X Check if None	
Sìgn	ature		Date 08/11/1999	
Prin	ted Name and 1	itie Romano Romani - President	Page	4 of 7
j.	á l			

Registrant Name: Parry and Romani Associates, Inc. Client Name: Pfizer, Inc. Data Description Item Lobbyist Name Covered Official Position New Lobbyist 18a Romani, Romano 18b No 18¢ Lobbyist Name Covered Official Position New Lobbyist Składaby, Linda 18a 18b 18c No Page 5 of 7

Client Name: Pfizer, Inc. LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the registrant rengaged in obbying on behalf of the client during the reporting period. Using a separate page for each cade, provide information as requested. Attach additional page(s) as needed. 15. General issue area code: MMM	Registrant Name:	Parry and Romani Associates, Inc.		
information as requested. Attach additional page(s) as needed. Content issue area code MMM (one per page)	Client Name:	Pfizer, Inc.		
16. Specific Lobbying issues 000., No Activity This Reporting Period, 17. House(s) of Congress and Federal agencies contacted	engaged in Jobbyic	g on behalf of the client during the reporting po		
17. House(s) of Congress and Federal agencies contacted Mark Check if None	15. General issue	area code MMM (one per page)	V	
18. Name of each individual who acted as a lobbyist in this issue area Name Covered Official Position (if applicable) New None, No				
18. Name of each individual who acted as a lobbyist in this issue area Name Covered Official Position (if applicable) New None, No				
18. Name of each individual who acted as a lobbyist in this issue area Name Covered Official Position (if applicable) New None, No				
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Name Covered Official Position (if applicable) New NONE, No 19. Interest of each foreign entity in the specific issues listed on line 16 above X Check if None Signature Date 08/11/1999	17. House(s) of C	Congress and Federal agencies contacted	∑ Check if None	
Name Covered Official Position (if applicable) New NONE, No 19. Interest of each foreign entity in the specific issues listed on line 16 above X Check if None Signature Date 08/11/1999				
Name Covered Official Position (if applicable) New NONE, No 19. Interest of each foreign entity in the specific issues listed on line 16 above X Check if None Signature Date 68/11/1999				
NONE, No No No No No No No No No N	18. Name of each	individual who acted as a lobbyist in this issue	атер	
19. Interest of each foreign entity in the specific issues listed on line 16 above Check if None Signature Date	Name		Covered Official Position (if applicable)	New
Signature	NONE,			No
Signature				
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	19. Interest of each	th foreign entity in the specific issues listed on	line 16 above 🛮 🛣 Check if None	
Printed Name and Title Romano Romani - President Page 6 of 7	Signature		Date 08/11/1999	
	Printed Name and	ritle Romano Romani - President		Page 6 of 7
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_	istrant Name:	Parry and Romani Associates, Inc.		
Clie	ant Name:	Pfizer, Inc.		
eng	aged in lobbyic		y to reflect the general issue areas in which the registrant my period. Usi ng a separate page for each code , provide i.	
£5.	General issue	arca code TAX (one per page)		
16.	Specific Lobb 000., No acti	rying issues vity this recording period.,		
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17	House(s) of (ongress and Federal agentics contacted	₩ Check if None	
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		*	todae taes	
	Name	•	Covered Official Position (if applicable)	New
			>	New No
	Name		>	-
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	Name		Covered Official Position (if applicable)	-
	Name		Covered Official Position (if applicable)	-
	Name		Covered Official Position (if applicable)	-
	Name		Covered Official Position (if applicable)	-
19.	Name NONE,		Covered Official Position (if applicable)	-
19.	Name NONE,		Covered Official Position (if applicable)	-
	Name NONE, Interest of ea		Covered Official Position (if applicable) d on line 16 above	-
Sign	Name NONE, Interest of ea	th forcign entity in the specific issues listed	Covered Official Position (if applicable)	-
Sign	Name NONE, Interest of ea		Covered Official Position (if applicable) d on line 16 above	No