Clerk of the House of Representatives Secretary of the Senate Legislative Resource Center B-106 Cannon Building Washington, DC 20515

Office of Public Records 232 Hart Building Washington, DC 20510

SECRETARY OF THE SE 03 MAY 29 AM 10: 1

## LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Che	ck if this is an Amend	ded Registration	1. Effective Date of Registration 5/1/03			
2. House Identification Number			Senate Identification Number			
RI	EGISTRANT					
3.	Registrant Name	Williams & Jensen, PC				
	Address	1155 21st Street, NW	Suite 300			
	City	Washington	State DC Zip 20036			
4.	Principal place of bu	usiness (if different from line 3)	State/Zip (or Country)			
5.	Telephone number and contact name Contact E-Mail (optional)  202-659-8201 Barbara W. Bonfiglio					
6.	General description  Law Firm	of registrant's business or activities				
<b>C</b> ]		bying firm is required to file a separate regised "Self" and proceed to line 10.	tration for each client. Organizations employing in-	house lobbyists should cl		
7.	Client Name	Pfizer				
	Address	325 7th Street NW	Suite 1200			
	City	Washington	State DC Zip 20004			
8.	Principal place of b	usiness (if different from line 7)	State/Zip (or Country)			
9.	General description Health care	of client's business or activities				
L 10	in this section has s	served as a "covered executive branch of	t as a lobbyist for the client identified on line ficial" or "covered legislative branch official' nd/or legislative position(s) in which the pers	within two years of		
	Name		Covered Official Position	(if applicable)		
	Susan B. Hirshma	nn				

Form LD-1 (Rev. 06/98)

Registrant Name:	Williams & Jenser	1, PC						
Client Name:	Pfizer							
LOBBYING 11. General lobb HCR		ct all applicable code	es listed in	instructions and on the rev	erse side	of Form LD-1, page 1.		
12. Specific lobbying issues (current and anticipated)  Strategic advice on health care and intellectual property legislation policy matters								
13. Is there an e	period and in whole o	ent that contributes r major part plans, si	more than supervises, o	\$10,000 to the lobbying act or controls the registrant's local Complete the rest of this	obbying section f	activities? For each entity matching t		
	criteria above, then proceed to line 14.							
	Name		Address		Principal Place of Busin (city and state or count			
FOREIGN I	ENTITIES foreign entity that:							
a) hol b) dir of c) is a lob	ds at least 20% equita ectly or indirectly, in the client or any organ	whole or in major pa nization identified on t or any organization	rt, plans, su line 13; or	on line 13 and has a direct	finances	s, or subsidizes activities		
	Tund date me regione			criteria above, the sign a	nd date t	the registration.		
Nam	e	Address		Principal Place of Bus (city and state or cour		Amount of contribution for lobbying activities		
	2			7	<u> </u>			
Signature /	MMA	IM	CK	W	Date .	5/16/2003		

Printed Name and Title

Barbara W. Bonfiglio - Attorney

Form LD-1 (Rev. 06/98)

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