

Clerk 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

SECRETARY OF THE SENATE
05 FEB 14 PM 3:38

LOBBYING REPORT

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

1. Registrant Name PodestaMattoon			
2. Registrant Address <input type="checkbox"/> Check if different than previously reported		Suite 900 East	
Address 1001 G Street, NW		DC 20001	
City Washington		State/Zip (or Country)	
3. Principal Place of Business (if different from line 2)			
City		State/Zip (or Country)	
4. Contact Name		Telephone	E-mail (optional)
Jeff Cordeau		202-879-9366	jcordeau@podestamattoon.com
5. Senate ID #			31680-734
7. Client Name <input type="checkbox"/> Self			6. House ID #
Serono Laboratories, Inc.			31110-077

TYPE OF REPORT 8. Year 2004 Midyear (January 1-June 30) OR Year End (July 1-D

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 Lobb

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms	13. Organizations
<p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> >> \$ <u>\$80,000.00</u> Income (nearest \$20,000)</p> <p>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).</p>	<p>EXPENSES relating to lobbying activities for this reporting period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> >> \$ _____ Expenses (nearest \$</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA defir</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 60 the Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 16 Internal Revenue Code</p>

Signature _____ Date _____

Printed Name and Title **Gwen Mellor - Principal** _____]

Registrant Name: PodestaMattoon

Client Name: Serono Laboratories, Inc.

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

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

16. Specific Lobbying issues

Implementation of H.R.1 Medicare Prescription Drug and Modernization Act

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

Check if None

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

Name	Covered Official Position (if applicable)
Baker, Teal	
Cohen, Sharon	
Edgar-Gooding, Rebecca	
Fritts, Kimberley	
James, Claudia	
Mellor, Gwen	
Podesta, Anthony	

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

Check if None

Signature



Filing #74259ba0-6482-48bd-85b3-510a113aaa5d - Page 3 of 6

Date **2/14/2005**

Signature _____ Date _____

Printed Name and Title **Gwen Mellor - Principal** _____ P:

Registrant Name: **PodestaMattoon**

Client Name: **Serono Laboratories, Inc.**

Information Update Page - Complete ONLY where registration information has changed.

20. Client new address

21. Client new principal place of business (if different from line 20)

City State/Zip (or Country)

22. New general description of client's business or activities

LOBBYIST UPDATE

23. Name of each previously reported individual who is **no longer** expected to act as a lobbyist for the client
Littman, Drew
Tornquist, David

ISSUE UPDATE

24. General lobbying issues previously reported that **no longer** pertain

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal Place of Business (city and state or country)

26. Name of each previously reported organization that is **no longer** affiliated with the registrant or client

FOREIGN ENTITIES

27. Add the following foreign entities

Name	Address	Principal Place of Business (city and state or country)	Amount of contribution for lobbying activities

28. Name of each previously reported foreign entity that **no longer** owns, or controls, or is affiliated with the registrant or affiliated organization

Signature _____ Date _____

Printed Name and Title **Gwen Mellor - Principal** _____ P