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LOBBYING REPORT

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

1. Registrant Name Wise & Associates			
2. Address <input type="checkbox"/> Check if different than previously reported 444 North Capitol Street, NW, Suite 821			
3. Principal Place of Business (if different from line 2) Washington DC City: State/zip (or Country)			
4. Contact Name Tricia O'Hare	Telephone (202) 737-1960	E-mail (optional)	5. Senate ID #
7. Client Name <input type="checkbox"/> Self PhRMA			6. House ID # 33681035

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

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

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p align="center">12. Lobbying Firms</p> <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>20,000.00</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 align="center">13. Organizations</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 \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description of</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code</p>
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Signature _____

Date **2/15/2005**

Printed Name and Title

Nicholas Wise, President

LD-2 (REV. 4/03)

PAGE 1 of

Registrant Name Wise & Associates Client Name PhRMA

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

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

16. Specific lobbying issues

Best Pharmaceuticals for Children Act legislation and related issues

17. House(s) of Congress and Federal agencies contacted ☐ Check if None

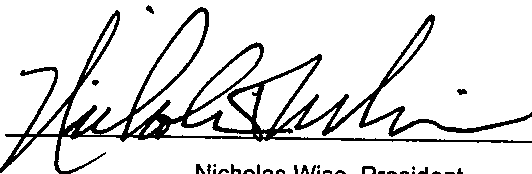
House of Representatives
US Senate

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

Name	Covered Official Position (if applicable)
Nicholas Wise	

19. Interest of each foreign entity in the specific issues listed on line 16 above ☒ Check if None

Signature



Date 2/15/2005

Printed Name and Title _____

Form LD-2 (Rec. 4/03)

Page _____