

AMENDMENT

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
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SECRETARY OF THE SENATE

# LOBBYING REPORT

04 SEP 15 AM 11:20

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

1. Registrant Name Crowell & Moring International, Ltd.			
2. Address <input type="checkbox"/> Check if different than previously reported 1001 Pennsylvania Avenue, NW			
3. Principal Place of Business (if different from line 2) City: Washington State/Zip (or Country) DC 20004			
4. Contact Name	Telephone	E-mail (optional)	5. Senate ID#
Melissa Coyle	202-624-2895		11388-75
7. Client Name <input type="checkbox"/> Self			6. House ID #
Novartis Corporation			31881004

**TYPE OF REPORT** 8. Year 2004 Midyear (January 1-June 30)  OR Year End (July 1-December 3)

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 Acti

## INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p><b>12. Lobbying Firms</b></p> <p><b>INCOME</b> relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> <input type="checkbox"/> \$ _____ 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><b>13. Organizations</b></p> <p><b>EXPENSES</b> relating to lobbying activities for this period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> <input type="checkbox"/> \$ _____ Expenses (nearest</p> <p><b>14. REPORTING METHOD.</b> Check box to indicate accounting method. See instructions for description</p> <p><input checked="" type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA de</p> <p><input type="checkbox"/> <b>Method B.</b> Reporting amounts under section the Internal Revenue Code</p> <p><input type="checkbox"/> <b>Method C.</b> Reporting amounts under section Internal Revenue Code</p>
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Signature Melissa Coyle  
 Printed Name and Title Melissa Coyle, Director



Registrant Name Crowell & Moring International, Ltd Client Name Novartis Corporation

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

15. General issue area code \_\_\_\_\_ (one per page)

16. Specific lobbying issues

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

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

Name	Covered Official Position (if applicable)
Melissa Coyle	

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

Signature *Melissa Coyle* Date 9/13/04

Printed Name and Title Melissa Coyle, Director



Registrant Name Crowell & Moring Inerntional, Ltd. Client Name Novartis Corporation

**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

**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 B (city and state or cc

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	Ownersh in

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

Signature *Melissa Coyle* Date 9/13/04  
 Printed Name and Title Melissa Coyle, Director

