

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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LOBBYING REPORT

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

1. Registrant Name <u>BARNES, RICHARDSON & COLBURN</u>			
2. Address <input type="checkbox"/> Check if different than previously reported <u>1225 Eye Street, N.W., Suite 1150, Washington, DC 20005</u>			
3. Principal Place of Business (if different from line 2) City: _____ State/Zip (or Country) _____			
4. Contact Name <u>Matthew T. McGrath</u>		Telephone <u>202 457-0300</u>	E-mail (optional) _____
7. Client Name <input type="checkbox"/> Self <u>Agouron Pharmaceuticals, Inc.</u>			5. Senate ID # _____ 6. House ID # _____

TYPE OF REPORT 8. Year 2002 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 Lobby

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 checked="" type="checkbox"/></p> <p>\$10,000 or more <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 align="center">13. Organizations</p> <p>EXPENSES 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"/> ⇨ \$ _____ 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 de</p> <p><input type="checkbox"/> Method B. Reporting amounts under section Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section Internal Revenue Code</p>
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Signature _____

Matthew T. McGrath

Printed Name and Title Matthew T. McGrath, Partner

LD-2 (REV. 6/98)

Registrant Name _____

Client Name _____

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

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

16. Specific lobbying issues

Promote introduction of temporary duty suspension legislation

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

Check if None

House of Representatives
Senate

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

Name	Covered Official Position (if applicable)
Matthew T. McGrath	
Robert A. Shapiro	

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

Check if None

Signature Matthew T. McGrath Date 8/14/02

Printed Name and Title

Matthew T. McGrath, Partner

Form LD-2 (Rev. 6/98)

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