

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  
 00 JAN 31 AM 7:40

**LOBBYING REPORT**

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

1. Registrant Name <i>BERGSON &amp; COMPANY</i>			
2. Address <input type="checkbox"/> Check if different than previously reported <i>190 FALCON RIDGE LN</i>			
3. Principal Place of Business (if different from line 2) City: <i>GREEN FALLS</i> State/Zip (or Country) <i>VA 22066</i>			
4. Contact Name <i>PAUL C. BERGSON</i>	Telephone <i>703-757-9270</i>	E-mail (optional)	5. Senate ID # <i>6017-57</i>
7. Client Name <input type="checkbox"/> Self <i>SMOKELESS TOBACCO COUNCIL</i>			6. House ID # <i>31379003</i>

TYPE OF REPORT 8. Year *1999* Midyear (January 1-June 30)  OR Year End (July 1-December 31)

9. Check if this filing amends a previously filed version of this report   
 10. Check if this is a Termination Report  Termination Date *31 Dec 99* 11. No Lobbying Activity

<p><b>INCOME OR EXPENSES</b> Complete Either Line 12 OR Line 13</p>	
<p><b>12. Lobbying Firms</b></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"/> ⇒ \$ <i>40,000</i>  <small>Income (nearest \$20,000)</small></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>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"/> ⇒ \$ _____  <small>Expenses (nearest \$20,000)</small></p> <p><b>14. REPORTING METHOD.</b> Check box to indicate expense accounting method. See instructions for description of options.</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definitions only</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code</p>

Signature *Paul C. Bergson*  
 Printed Name and Title *PAUL C. BERGSON*

Registrant Name BERSON & COMPANY Client Name SMOKELESS TOBACCO COUNCIL

**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 TAB (one per page)

16. Specific lobbying issues  
S.584 CHILDREN'S STRONGS PREVENTION ACT SEC 2 MEDICAID PROGRAM  
H.R. 147 YOUTH TOBACCO POSSESSION PREVENTION ACT SEC 2 STATE LAW

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

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

Name	Covered Official Position (if applicable)	New
<u>PAUL C. BERSON</u>		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

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

Signature Paul Berson Date 2/27/00  
Printed Name and Title PAUL C. BERSON