Clerk of the House of Representatives Secretary of the Senate Legislative Resource Center B-106 Cannon Building Washington, DC 20515

Office of Public Records 232 Hart Building Washington, DC 20510

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LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Ch	eck if this is an Amend	ed Registration		1. Effective Date of Registration	2/26/2004	
2.	House Identification	Number <u>N/A</u>		Senate Identification Number	N/A	
RI	EGISTRANT					
3.	Registrant Name	Piper Rudnick LL	P			
	Address	1200 19th Street, N	N.W.			
	City	Washington		State DC Zip 20036		
4.	Principal place of bus	siness (if different fror	m line 3)	State/Zip (or Country)		
5.	Telephone number ar (202) 861-6449	nd contact name John H. Zentay	Contact	E-Mail (optional) john.zentay@piperrudnick.com		
6.	General description o	of registrant's business	or activities			
C	•	ying firm is required to fi I "Self" and proceed to li	· _ ~	on for each client. Organizations employing i	n-house lobbyists should c	
7.	Client Name	Bristol-Myers Squ	ibb Company			
	Address	655 15th Street, N	.w.			
	City	Washington		State DC Zip 20005		
8.	Principal place of bus	siness (if different fror	m line 7)			
	City	New York		State/Zip (or Country) NY 10154		
9.	General description of client's business or activities Pharmaceutical research and development					
	in this section has ser	rved as a "covered exe	cutive branch officia	a lobbyist for the client identified on lind " or "covered legislative branch official r legislative position(s) in which the per	" within two years of	
	Name			Covered Official Position	ı (if applicable)	
	James J. Blanchard					
	David A. Weiss					

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00000720390

Registrant Name:	Piper Rudnick LL	P					
Client Name:	Bristol-Myers Squibb Company						
LOBBYING ISSUES 11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1, page 1. PHA							
12. Specific lobb							
13. Is there an en	eriod and in whole or	ent that contributes more th	es, or controls the registrant's	is section for each entity matching			
	Name		Address	Principal Place of Busi (city and state or coun			
b) direct of th	oreign entity that: s at least 20% equitab atly or indirectly, in w e client or any organi	hole or in major part, plans zation identified on line 13	; or	d on line 13; or ss, finances, or subsidizes activities ct interest in the outcome of the			
	ying activity? and date the registrati	ion. 🗆 Yes		is section for each entity matching and date the registration.			
Name		Address	Principal Place of B (city and state or co	usiness Amount of contribution			
Signature	Om a	20	•	Date 8/16/2004			

John H. Zentay - Partner

Form LD-1 (Rev. 06/98)

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