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

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Secretary of the Senate Office of Public Records 232 Hart Building Washington, DC 20510

OD FEB 11 PH 2: 12

H.O.

## LOBBYING REPORT

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

i. Registrant Name Barbour Griffilh & Rogers			
Zare remejeranning	Centh Floor DC 20004		
3. Principal Place of Business (if different from line 2)			
City State/Zip (or Country)			
4. Contact Name Telephone E-mad Evant Rikktye 202-333-4936	(optional) 5. Senate (D # 5357-164		
7. Client Name [] Self	6. House €D#		
Glaxo-Wellcome	31564002		
INCOME OR EXPENSES - Complete Either 12. Lobbying Firms	Line 12 OR Line 13		
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating to lobbying activities for this reporting period were:		
Less than \$10,000 []	Less than \$10,000 □		
\$10,000 or more   \$3 >> \$   \$60,000.00	\$10,000 or more		
Provide a good faith estimate, rounded to the nearest	14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options.		
\$20,000 of all lobbying related income from the client (including all payments to the registrant by any other entity	Method A. Reporting amounts using LDA definitions only		
for lobbying activities on behalf of the client).	☐ Method B. Reporting amounts under section 6033(b)(8) of the laternal Revenue Code		
a	☐ Method C. Reporting amounts under section 162(c) of the Internal Revenue Code		
Signature Halffurt	Date01/13/2000		
Printed Name and Title G.O. Griffith, Jr. Managing Part	ner Page 1 of 3		

15	rmation as requested. Attach additional page(  General issue area code HCR (or						
	Specific Lobbying issues H.R.984, Caribbean and Central America Relief and Economic Stabilization Act, S.1233, Agriculture, Rural Development, Food and Drug Administration, and Related Agencies Appropriations Act, 20						
	5.1387, Africa Growth and Opportunity Act, 5.1389, United States-Carribbean basin Trade Enhancement Act,						
17.	House(s) of Congress and Federal agencies House of Representatives US Senate	contacted   Check if None					
	•						
18.	Name of each individual who acted as a lob	byist in this issue area					
18.	Name of each individual who acted as a lob	byist in this issue area  Covered Official Position (if applicable)	Nev				
18.		1	Net No				
18.	Name	1	Ne				
18. 	Name Barbour, Haley	1	Ne				
18. 	Name Barbour, Haley Griffith, Jr., G.O.	1	Ne No				
18.	Name Barbour, Haley Griffith, Jr., G.O. Henick, Henry C.	1	No No				
18.	Name  Barbour, Haley  Griffith, Jr., G.O.  Henick, Henry C.  Johnson, James H.	1	No No No				
18.	Name Barbour, Haley Griffith, Jr., G.O. Henick, Henry C. Johnson, James H. Monroe, Lorea	1	No No No No				
18.	Name Barbour, Haley Griffith, Jr., G.O. Henick, Henry C. Johnson, James H. Monroe, Lorea Rogers, Jr., Edward M.	Covered Official Position (if applicable)	No No No No No				
4.5-04	Name Barbour, Haley Griffith, Jr., G.O. Henick, Henry C. Johnson, James H. Monroe, Lorea Rogers, Jr., Edward M.	Covered Official Position (if applicable)	No No No No No				

ient Name: C	Glaxo-Wellcame							
formation Up	date Page - Compl	ete ONLY where re	gistration information bas	changed.				
6. Client new address	•							
11. Сірэн лем реіосірі	al place of business (if differen	us from ties 200						
Ciny	States/Cip (or Country)							
2. New general desert	iption of client's business or ac	tivities	•••••	***************************************	v 2000000 BC1 13-13-000000			
LOBBYIST UPD	14 TF							
23. Name of each p	previously reported indi	vidual who is no lon:	ger expected to act as a linbby	yist for the client				
Johnson, Jam	cs H.							
ISSUE UPDATE			<del> </del>	<del> </del>				
	ng issues previously rep	orted that no longer	pertain					
AFFILIATED O	RGANIZATIONS							
5. Add the follow	ing affiliated organizati	on(\$)						
		Pr		Principal Place of B	Principal Place of Business			
	Name	Address		(city and state or country)				
	proviously reported oras	i unization that is no to	nger a(Tiljated with the regis	trant or client				
'6 Name of each r	morning repeated orga	ittration that is its is	inger accipates was the regis	control cavity				
<ol> <li>Name of each p</li> </ol>								
26. Name of each p								
FOREIGN ENTI								
FOREIGN ENT 27. Add the follow	ing foreign entitles		Printipal Place of Business	Amount of contribution	Owncestrip %			
FOREIGN ENTI	ing foreign entitles	stdress	Principal Place of Business (city and state or country)	Amount of contribution for lubbying activities	Ownceship %			
FOREIGN ENT) 27. Add the follow	ing foreign entitles	address	1	į.	1			
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FOREIGN ENTI 27. Add the follow Name	ing foreign entitles		(city and state or country)	for Jubbying activities	ia căient			
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FOREIGN ENTI 27. Add the follow Name	ring foreign entitles		(city and state or country)	for Jubbying activities	ia căient			
FOREIGN ENTI 27. Add the follow Name	ring foreign entitles		(city and state or country)	for Jubbying activities	ia căient			
FOREIGN ENTI 27. Add the follow Name	ring foreign entitles		(city and state or country)  ger owns, or controls, or is	for Jubbying activities	ia căient			