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SECRETARY OF THE SENATE

02 FEB 14 PM 5:33

## LOBBYING REPORT

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

1. Registrant Name Reed Smith			
2. Address <input type="checkbox"/> Check if different than previously reported 1301 K Street, N.W. - Suite 1100 - East Tower, Washington, DC 2000			
3. Principal Place of Business (if different from line 2) City: _____ State/Zip (or Country) _____			
4. Contact Name	Telephone	E-mail (optional)	5. Senate
Phillips S. Peter	202-414-9258		329
7. Client Name <input type="checkbox"/> Self			6. House
Eclipse Surgical Technologies, Inc.			303

**TYPE OF REPORT** 8. Year 2001 Midyear (January 1-June 30) ☐ OR Year End (July

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 Lo

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

12. Lobbying Firms	13. Organizations
<b>INCOME</b> relating to lobbying activities for this reporting period was:	<b>EXPENSES</b> relating to lobbying activities for t period were:
Less than \$10,000 <input checked="" type="checkbox"/>	Less than \$10,000 <input type="checkbox"/>
\$10,000 or more <input type="checkbox"/> → \$ _____ Income (nearest \$20,000)	\$10,000 or more <input type="checkbox"/> → \$ _____ Expenses (neare
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).	<b>14. REPORTING METHOD.</b> Check box to i accounting method. See instructions for descrip
	<input type="checkbox"/> Method A. Reporting amounts using LDA
	<input type="checkbox"/> Method B. Reporting amounts under secti Internal Revenue Code
	<input type="checkbox"/> Method C. Reporting amounts under secti Internal Revenue Code

Signature \_\_\_\_\_

*Phillips S. Peter*

*2/12/02*

Printed Name and Title Phillips S. Peter, Counsel, Head of Government Relations

