

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-  
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## LOBBYING REPORT

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

|   |  |                                  |   |
|---|--|----------------------------------|---|
| 1. Registrant Name<br><b>B&amp;D Sagamore (formerly Sagamore Associates)</b>  |  |                                  |   |
| 2. Registrant Address <input type="checkbox"/> Check if different than previously reported<br>Address <b>805 15th Street, NW</b> Suite <b>700</b><br>City <b>Washington</b> State/Zip (or Country) <b>DC 20005</b> <b>USA</b> |  |                                  |   |
| 3. Principal Place of Business (if different from line 2)<br>City _____ State/Zip (or Country) _____  |  |                                  |   |
| 4. Contact Name<br><b>Margaret Walker</b>   |  | Telephone<br><b>202-312-7400</b> | E-mail (optional)<br>_____  |
| 7. Client Name <input type="checkbox"/> Self<br><b>Parent Project Muscular Dystrophy</b>  |  |                                  | 5. Senate ID #<br><b>34158-1356</b><br><br>6. House ID #<br><b>30124100</b> |

**TYPE OF REPORT** 8. Year 2003 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 \_\_\_\_\_ 11. No Lobbying Activities

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

| 12. Lobbying Firms   | 13. Organizations   |
|--|---|
| <p><b>INCOME</b> 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"/> &gt;&gt; \$ <u>\$80,000.00</u><br/>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><b>EXPENSES</b> 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"/> &gt;&gt; \$ _____<br/>Expenses (nearest \$20,000)</p> <p><b>14. REPORTING METHOD.</b> Check box to indicate reporting accounting method. See instructions for description of method.</p> <p><input type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definitions</p> <p><input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 6033(c) of the Internal Revenue Code</p> <p><input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162(e) of the Internal Revenue Code</p> |

Signature \_\_\_\_\_ Date **7/30/2003**

Printed Name and Title **Dena Morris - Senior Vice President** \_\_\_\_\_ Page



Signature \_\_\_\_\_ Date 7/30/2003

Printed Name and Title **Dena Morris - Senior Vice President** Pag

Registrant Name: B&D Sagamore (formerly Sagamore Associates) 5  
 Client Name: Parent Project Muscular Dystrophy 0  
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**Information Update Page - Complete ONLY where registration information has changed.**

20. Client new address
- 
21. Client new principal place of business (if different from line 20)
- City \_\_\_\_\_ State/Zip (or Country) \_\_\_\_\_
- 
22. New general description of client's business or activities

**LOBBYIST UPDATE**

23. Name of each previously reported individual who is **no longer** expected to act as a lobbyist for the client  
**Lowe, Serena**

**ISSUE UPDATE**

24. General lobbying issues previously reported that **no longer** pertain

**AFFILIATED ORGANIZATIONS**

25. Add the following affiliated organization(s)

| Name | Address | Principal Place of Business (city and state or country) |
|------|---------|---|
|      |         |   |

26. Name of each previously reported organization that is **no longer** affiliated with the registrant or client

**FOREIGN ENTITIES**

27. Add the following foreign entities

| Name | Address | Principal Place of Business (city and state or country) | Amount of contribution for lobbying activities | O |
|------|---------|---|--|---|
|      |         |   |  |   |

28. Name of each previously reported foreign entity that **no longer** owns, or controls, or is affiliated with the registrant or affiliated organization

Signature Dena Morris Date 7/30/2003

Printed Name and Title Dena Morris - Senior Vice President Page