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LOBBYING REPORT

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

Registrant Name Mayer, Brown, Rowe & Ma	aw LLP			
	heck if different than previously reported			
3. Principal Place of Busin	ness (if different from line 2)	1990099971111110000555711111	44400654454444444444	,
City:		State/Zip (or	Country)	
	P. Schmitz Telephone		E-mail (optional)	5. Senate ID 24123-147
7. Client Name Self Pfizer, Inc.	***************************************			8. House ID 31349-109
	amends a previously filed version of this reportmination Report 🗆 🖒 Termination Dat		1	II. □ No Lobb
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00000871933

Registrant Name John P. Schmitz	Client Name .Pfizer, Inc.
LOBBYING ACTIVITY. Select as many code lobbying on behalf of the client during the reporting Attach additional page(s) as needed.	es as necessary to reflect the general issue areas in which the regis period. Using a separate page for each code, provide informati
15. General issue area code <u>GOV</u> (or	ne per page)
16. Specific lobbying issues Pharmaceutical issues, S. 2307, S. 2493, S. 232	8
17. House(s) of Congress and Federal agencies confood & Drug Administration Health & Human Services House of Representatives	tacted Check if None
18. Name of each individual who acted as a lobbyis	<u>'</u>
Name	Covered Office Position (if applicable)
••••	
41666691111	

19. Interest of each foreign entity in the specific is	sues listed on line 16 above. Check if None
Signature	Date
Signature 1874 July P. Salarita	
Printed Name and <u>Title John P. Schmitz</u>	

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_	istrant Name <u>Mayer, Bro</u>		<u>LP</u> Client Name <u>.Pfizer, Inc.</u> LY where registration information	has changed.
	Client new address			
	Client new principal place of bu y State/Zip (or Country)	siness (if different fror		
	New general description of clier		es	•••••••••••••••••••••••••••••••••••••••
LO 23.	BBYIST UPDATE Name of each previously reporte	ed individual who is no	o longer expected to act as a lobbyist for	the client
	Sheila Dearybury Walcoff			
24.	UE UPDATE General lobbying issues previous FILIATED ORGANIZATIO Add the following affiliated org		nger pertain	
25.	Name	anization(s)	Address	Principal Place of (city and state or

26.	Name of each previously report	ed organization that is	no longer affiliated with registrant or cl	ient
FO:	REIGN ENTITIES Add the following foreign entiti	es		
	Name	Address	Principal place of busine (city and state or country	

28.	Name of each previously repo affiliated organization	orted foreign entity t	that no longer owns, <u>or</u> controls, <u>or</u>	is affiliated with the registra
Sig	nature		D	ate
Pri	nted Name and Title			