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SECRETARY OF THE CENATE

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LOBBYING REPORT

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

. Registrant Name PodestaMatte	oon				200
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	Business (if different fi				
City	Dusniess (ir dinicient ii	State/Zip (or Country)		
4. Contact Name Jeff Cordeau		Telephone 202-879-9366	E-mail (optional) jcordeau@podesta	mattoon.com	5. Senate ID # 31680-226
7. Client Name Genentech					6. House ID #
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2/14/2005

Signature	m www	 Date
Printed Name and Title	Sharon Cohen - Principal	

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Registrant Name	: PodestaMattoon	
Client Name:	<u>Genentech</u>	
engaged in lobb	CTIVITY. Select as many codes as necessary ying on behalf of the client during the reportine equested. Attach additional page(s) as needed.	to reflect the general issue areas in which the registrant g period. Using a separate page for each code, provide.
15. General iss		
Issues rela	obbying issues ited to generic biotechnology and drug rein tation of medicare drug coverage legislation	nportation n
17. House(s)	of Congress and Federal agencies contacted	☐ Check if None
Executive Fish & W	ent of Health & Human Services e Office of the President fildlife Service Representatives	
18. Name of 6	each individual who acted as a lobbyist in this	issue area
Name		Covered Official Position (if applicable)
Cohen, S	haron	
Fritts, Ki	mberley	
Littman,	Drew	
Mellor, (Gwen	
Podesta,	Anthony	-
Siciliano	, Jen	Dir. of Communications, Senate Appropriations
19. Interest o	of each foreign entity in the specific issues liste	ed on line 16 above Check if None

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Signature	/ UWIN		 Date 41112003	
Printed Name and	Title Sharon Co	ohen - Principal	 	_ ;

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J11-0	nt Name:	Genentech	
nga	iged in lobbyii	FIVITY. Select as many codes as necessary ag on behalf of the client during the reportinuested. Attach additional page(s) as needed.	to reflect the general issue areas in which the registrant g period. Using a separate page for each code, provid
	General issue		
6.	Specific Lob Corporate a	bying issues ccounting/tax treatment of stock options.	
17.		Congress and Federal agencies contacted epresentatives	☐ Check if None
18.	Name of eac	ch individual who acted as a lobbyist in this	issue area
	Name		Covered Official Position (if applicable)
	Cohen, Sha	ron	
	Fritts, Kim	berley	
	Littman, D	rew	
	Mellor, Gw	en	
	Podesta, A	nthony	
	~	an a	Dir. of Communications, Senate Appropriations
	Siciliano, J	en	

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Signature	(wow	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	 Date
Printed Name and	d Title Sharon	Cohen - Principal	

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Regi	strant Name:	<u>PodestaMattoon</u>	
	nt Name:	Genentech	
enga	iged in lobbyir	FIVITY. Select as many codes as necessing on behalf of the client during the reportuested. Attach additional page(s) as need	ary to reflect the general issue areas in which the registrant rting period. Using a separate page for each code, provide ed.
	General issue	i	
16.	Specific Lob Appropriati	bying issues ons for Oyster Point (California) ferry	project
			- a
17.		Congress and Federal agencies contacted presentatives	☐ Check if None
18.	Name of eac	th individual who acted as a lobbyist in the	nis issue area
	Name	<u></u>	Covered Official Position (if applicable)
	Cohen, Sha	ron	
	Fritts, Kim	berley	
	Littman, D	rew	
	Mellor, Gw	ven	
	Podesta, A	nthony	
	Siciliano, J	en	Dir. of Communications, Senate Appropriations
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	_	each foreign entity in the specific issues l	isted on line 16 above X Check if None

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Signature	JUM	· · · · · · · · · · · · · · · · · · ·	Date
Printed Name	and Title Sharon	Cohen - Principal	

lient Name:	Genentech			
				13
nformation	Update Page - C	Complete ONLY when	re registration information h	as changed.
20. Client new add	dress			
21. Client new pri	ncipal place of business (if	different from line 20)		
City		State/Zip (or Country)		
	description of client's busine	ess or activities		
LOBBYIST U 23. Name of ea Littman, I	ach previously reporte	d individual who is no	longer expected to act as a lo	bbyist for the client
ISSUE UPDA 24. General lo	ATE bbying issues previou	sly reported that no lo	nger pertain	
	D ORGANIZATIO			
	Name		Address	Principal Place of (city and state or
26. Name of e	each previously report	ed organization that is	no longer affiliated with the re	egistrant or client
FOREIGN E 27. Add the fo	ENTITIES ollowing foreign entiti	ies		
Name		Address	Principal Place of Busine (city and state or country	

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Signature) (MM (NVV	Date
Signature		
	Sharon Cohen - Principal	
Printed Name and Title	Dilaton Concil 11morpa-	