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

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LOBBYING REPORT 1:

1. Registrant name								
Organization M	ickey Ibarra & Associates							
2. Address C	heck if different than previously repo	rted	***************************************	/****/·*·		·	*************	***************************************
Address1 1140 Conne	cticut Ave N.W.			Suite	1100	þ		
City Washington		State	DC	Zip Co	de 20	036-	4001	Country U
3. Principal place of business (i	f different than line 2)		·····	*************		***********		
City City		State State	/Zip or Country	Zip Co	de			Country
4a. Contact Name Prefix Full Name	b. Telephone number	***********	e	. E-mail			5.	Senate ID#
Mr. Mickey Ibarra 7. Client Name Se	202-969-8777	CO	ntact@lbarr	aAssoci	ates.	com		72177-
7. Client Name Se						***********	6. 1	House ID# 35869 0
10. Check if this is a Terminatio		ion Dat		12			Year End	No Lobbying Ac
10. Check if this is a Terminatio INCOME OR EXPEN 12. Lo	_ 🗀	tion Dat	12 OR Lin EXPENS were:	ES relatin		3. Org	11. ganizati	No Lobbying Ac
IO. Check if this is a Terminatio INCOME OR EXPEN 12. Lo INCOME relating to lobbying a was:	n Report □ ⇒ Terminat SES - Complete Either bbying Firms	tion Dat	12 OR Lin	ES relatin \$10,000		3. Org	11. ganizati	No Lobbying Acons

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Registrant Name M	lickey Ibarra & Associ	ates C	Client Name Pfizer, Inc.					
Information l	Jpdate Page - Co	omplete ONLY where	registration info	rmation has changed.				
20. Client new ad Address	dress							
City		State	Zip Code	Country				
21. Client new pr	incipal place of business	s (if different than line 20)		Country				
City		State	~· ~ .					
	description of client's bu		Zip Code	Country				
LOBBYIST U 23. Name of eac		individual who is no lon	ger expected to act	as a lobbyist for the clien				
	Last Name	Suffix	First Name	Last Name				
<u> </u>		3						
2		4						
ISSUE UPDAT	E							
24. General lobb	ying issues that no lor	iger pertain	Find the code to	select below.				
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	ORGANIZATION wing affiliated organized							
	Vame	Address		Principal place of Busin				
	A 11			(city and state or cou				
	Add	•		City				
	Add			State Country				
	C/S/.			City State				
26 Name of each			2004					
	P	organization that is no lo	nger affiliated with	the registrant or client				
1	Ĺ	2	3					
FOREIGN EN	TITIES							
	wing foreign entities							
Name	Ac	ldress Prin	cipal place of business	Amount of contribution C				
	Street Address City		y and state or country)	for lobbying activities				
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		City						
		State	Country					
28. Name of each paffiliated organizated	reviously reported forei	gn entity that no longer ov	vns, <u>or</u> controls, <u>or</u> is	affiliated with the registran				
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				Ado a page for more				

Printed Name and Title Mickey Ibarra, President

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