

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 OF THE SENATE  
03 AUG 14 PM 12:00

## LOBBYING REPORT

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

1. Registrant Name Ropes & Gray			
2. Address <input type="checkbox"/> Check if different than previously reported 1301 K St. NW, Suite 800 East			
3. Principal Place of Business (if different from line 2) City: Washington State/Zip (or Country) DC 20005			
4. Contact Name Thomas M. Susman	Telephone (202) 626-3920	E-mail (optional) tsusman@ropesgray.com	5. Senate ID # 33687
7. Client Name <input type="checkbox"/> Self American Society of Clinical Oncology			6. House ID # 30721

**TYPE OF REPORT** 8. Year 2003 Midyear (January 1-June 30) ☒ OR Year End (July 1-Dec)

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

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

<p><b>12. Lobbying Firms</b></p> <p>INCOME 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"/> ⇒ \$ <u>40,000.00</u> 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>13. Organizations</b></p> <p>EXPENSES 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"/> ⇒ \$ _____ Expenses (nearest \$20,000)</p> <p><b>14. REPORTING METHOD.</b> Check box to indicate accounting method. See instructions for description of</p> <p><input checked="" type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 603 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162 Internal Revenue Code</p>
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Signature\_\_\_\_\_

Printed Name and Title\_\_\_\_\_

LD-2 (REV. 6/98)

F

Registrant Name Ropes & Gray Client Name American Society of Clinical Oncology

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which the registrant was engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code information as requested. Attach additional page(s) as needed.

15. General issue area code BUD (one per page)

16. Specific lobbying issues

FY 2004 NIH Appropriations

17. House(s) of Congress and Federal agencies contacted

☐ Check if None

U.S. House of Representatives  
U.S. Senate

18. Name of each individual who acted as a lobbyist in this issue area

Name	Covered Official Position (if applicable)
Elizabeth Goss, Partner	

19. Interest of each foreign entity in the specific issues listed on line 16 above

☒ Check if None

Signature

Date 08/13/2003

Printed Name and Title Samuel D. Turner, Partner

Form LD-2 (Rev.6/98)

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Registrant Name Ropes & Gray Client Name American Society of Clinical Oncology

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which the registrant was engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code information as requested. Attach additional page(s) as needed.

15. General issue area code HCR (one per page)

16. Specific lobbying issues

none

17. House(s) of Congress and Federal agencies contacted

☒ Check if None

18. Name of each individual who acted as a lobbyist in this issue area

Name

Covered Official Position (if applicable)

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.....  
.....  
.....  
.....  
.....  
.....

19. Interest of each foreign entity in the specific issues listed on line 16 above

☒ Check if None

Signature

Date 08/13/2003

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**Printed Name and Title** Samuel D. Turner, Partner

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Registrant Name Ropes & Gray Client Name American Society of Clinical Oncology

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which the registrant was engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code information as requested. Attach additional page(s) as needed.

15. General issue area code MED (one per page)

16. Specific lobbying issues

Cancer research legislation; cancer quality legislation

17. House(s) of Congress and Federal agencies contacted

☐ Check if None

U.S. House of Representatives  
U.S. Senate

18. Name of each individual who acted as a lobbyist in this issue area

Name	Covered Official Position (if applicable)
Elizabeth Goss, Partner	

19. Interest of each foreign entity in the specific issues listed on line 16 above

☒ Check if None

Signature

Date 08/13/2003

Printed Name and Title Samuel D. Turner, Partner

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Registrant Name Ropes & Gray Client Name American Society of Clinical Oncology

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which the registrant was engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code information as requested. Attach additional page(s) as needed.

15. General issue area code MMM (one per page)

16. Specific lobbying issues

Medicare Payment for Drugs and Drug-Related Services  
Reimbursement for Self-Administered Drugs

17. House(s) of Congress and Federal agencies contacted ☐ Check if None

U.S. House of Representatives  
U.S. Senate

18. Name of each individual who acted as a lobbyist in this issue area

Name	Covered Official Position (if applicable)
Samuel D. Turner, Partner	
Terry Coleman, Partner	

19. Interest of each foreign entity in the specific issues listed on line 16 above ☒ Check if None

Signature



Date 08/13/2003

Printed Name and Title Samuel D. Turner, Partner

Form LD-2 (Rev.6/98)

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