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# LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

**Check One:**  New Registrant  New Client for Existing Registrant  Amendment

1. Effective Date of Registration 05/01

2. House Identification \_\_\_\_\_

Senate Identification 315592

**REGISTRANT**  Organization  Individual

3. Registrant Organization J.C. White Consulting

Address 1120 G St. NW, Suite 1000

Address2 \_\_\_\_\_

City Washington

State DC

Zip 20005 -

Cou \_\_\_\_\_

4. Principal place of business (if different than line 3)

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

Cou \_\_\_\_\_

5. Contact name and telephone number

International Number

Contact Mr. Joel White

Telephone (202) 266-2630

E-mail JWhite@jcwhiteconsulting.com

6. General description of registrant's business or activities

Policy, communications, strategy and lobbying

## CLIENT

*A Lobbying Firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should be labeled "Self" and proceed to line 10.*  Self

7. Client name PhRMA

Address 950 F St. NW, Suite 300

City Washington

State DC

Zip 20005 -

Cou \_\_\_\_\_

8. Principal place of business (if different than line 7)

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

Cou \_\_\_\_\_

9. General description of client's business or activities

Trade association representing pharmaceutical manufacturers

## LOBBYISTS

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any person in this section has served as a "covered executive branch official" or "covered legislative branch official" within two years of becoming a lobbyist for the client, *state the executive and/or legislative position(s) in which the person served.*

Name			Covered Official Position (if applicable)
First	Last	Suffix	
Joel	White		Staff Director, Ways and Means Health Subcommittee

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v5.0.0i

### LOBBYING ISSUES

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1, pa

MMM

12. Specific lobbying issues (current and anticipated)

Work with the Congress to provide information on prescription drug issues such as pricing, importation and safety.

### AFFILIATED ORGANIZATIONS

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the registrant in a semiannual period and in whole or in major part plans supervises or controls the registrant's lobbying activities?

No --> Go to line 14.

Yes --> Complete the rest of this section for each entity matchi criteria above, then proceed to line 14.

Name	Address			Principal Place of Busin
	Street City	State/Province	Zip Code Country	
				City
				State Country
				City
				State Country
				City
				State Country

### FOREIGN ENTITIES

14. Is there any foreign entity

- a) holds at least 20% equitable ownership in the client or any organization identified on line 13: or
- b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or subsidizes acti the client or any organization identified on line 13; or
- c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in the outcome of lobbying activity?

No --> Sign and date the registration.

Yes --> Complete the rest of this section for each entity matchi: the criteria above, then sign the registration.

Name	Address			Principal place of business (city and state or country)	Amount of contribution for lobbying activities
	Street City	State/Province	Country		
				City	
				State Country	
				City	
				State Country	

Signature *Joel White* Date 5/

Printed Name and Title Joel White, President, JCWhite Consulting

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