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05 JUN -8 PM 2:35

LOBBYING REPORT

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

1. Registrant name			
Organization		The Cormac Group	
2. Address <input type="checkbox"/> Check if different than previously reported			
Address 1 1900 M Street, NW Suite 720			
City	Washington	State	DC
Zip Code	20036	Country	
3. Principal place of business (if different than line 2)			
City		State	
Zip Code		Country	
4a. Contact Name		b. Telephone number	c. E-mail
Prefix	Full Name		
Ms.	Kerri Krstovich	202-467-4700	kk@thecormacgroup.com
7. Client Name <input type="checkbox"/> Self			5. Senate ID #
Amgen			66773
			6. House ID #
			35626

TYPE OF REPORT 8. Year 2004 Midyear (January 1-June 30) ☐ OR Year End (July 1-December) ☒

9. Check if this filing amends a previously filed version of this report ☒

10. Check if this is a Termination Report ☐ Termination Date 6/1/05 11. No Lobbying ☐

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms	13. Organizations
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating to lobbying activities for this reporting period were:
Less than \$10,000 <input checked="" type="checkbox"/>	Less than \$10,000 <input type="checkbox"/>
\$10,000 or more <input type="checkbox"/> ⇒ \$ <u> </u>	\$10,000 or more <input type="checkbox"/> ⇒ \$ <u> </u>
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).	14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description of
	<input type="checkbox"/> Method A. Reporting amounts using LDA definition
	<input type="checkbox"/> Method B. Reporting amounts under section 6033(f) Internal Revenue Code
	<input type="checkbox"/> Method C. Reporting amounts under section 162(e) Revenue Code

Form

Printed Name and Title Patrick H. Williams Principal

Client Name Amgen

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

Add page to continue specific issues description for this issue

Reimportation

General Pharmaceutical Issues.

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 *Add a page to continue adding lobbyists if*

[illegible]

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

Add a page for a d.

Printed Name and Title Patrick H. Williams, Principal

LD-2DS (REV. 4/03)

Page _

Registrant Name The Cormac GroupClient Name Amgen**Information Update Page - Complete ONLY where registration information has changed.****20. Client new address**

Address

City State Zip Code Country

21. Client new principal place of business (if different than line 20)

City State Zip Code Country

22. New general description of client's business or activities**LOBBYIST UPDATE****23. Name of each previously reported individual who is no longer expected to act as a lobbyist for the client**

	First Name	Last Name	Suffix		First Name	Last Name
1	<input type="text"/>	<input type="text"/>	<input type="text"/>	3	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>	<input type="text"/>	4	<input type="text"/>	<input type="text"/>

ISSUE UPDATE**24. General lobbying issues that no longer pertain**

Find the code to select below.

AFFILIATED ORGANIZATIONS**25. Add the following affiliated organization(s)**

Name	Address	Principal place of business (city and state or country)
<input type="text"/>	Address <input type="text"/> C/S/Z <input type="text"/>	City <input type="text"/> State <input type="text"/> Country <input type="text"/>
<input type="text"/>	Address <input type="text"/> C/S/Z <input type="text"/>	City <input type="text"/> State <input type="text"/>

26. Name of each previously reported organization that is no longer affiliated with the registrant or client

1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>
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FOREIGN ENTITIES**27. Add the following foreign entities**

Name	Street Address City	Address State/Province Country	Principal place of business (city and state or country)	Amount of contribution for lobbying activities
<input type="text"/>	<input type="text"/>	<input type="text"/>	City <input type="text"/> State <input type="text"/> Country <input type="text"/>	<input type="text"/>

28. Name of each previously reported foreign entity that no longer owns, or controls, or is affiliated with the registrant or affiliated organization

1	<input type="text"/>	3	<input type="text"/>	5	<input type="text"/>
2	<input type="text"/>	4	<input type="text"/>	6	<input type="text"/>

Add a page for more

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