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LOBBYING REPORT

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

1. Registrant Name
ECOLAB INC

2. Address ☐ Check if different than previously reported
ECOLAB CENTER NORTH

3. Principal Place of Business (if different from line 2)

City: ST. PAUL State/zip (or Country) MN. 55102

4. Contact Name	Telephone	E-mail (optional)	5. Senate ID #
JEFFREY K. PETERSON	651-293-2557		13084-1

7. Client Name ☐ Self.	6. House ID #
	13084

TYPE OF REPORT 8. Year 2004 Midyear (January 1-June 30) ☑ OR Year End (July 1-Decem

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 A

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms

INCOME relating to lobbying activities for this reporting period was:

Less than $10,000 ☐

$10,000 or more ☐ ⇨ $ _____
Income (nearest $20,000)

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).

13. Organizations

EXPENSES relating to lobbying activities for this reporting period were:

Less than $10,000 ☐

$10,000 or more ☑ ⇨ $ 20,000
Expenses (nearest $20,000)

14. REPORTING METHOD. Check box to indicate exper accounting method. See instructions for description of optio

☐ **Method A.** Reporting amounts using LDA definitions

☐ **Method B.** Reporting amounts under section 6033(b)(Internal Revenue Code

☑ **Method C.** Reporting amounts under section 162(e) o Internal Revenue Code

Signature Jeffrey K. Peterson Date 8/16/04

Printed Name and Title V UU JEFFREY K. PETERSON; DIRECTOR, GOVERNMENT R

LD-2 (REV. 4/03)

Registrant Name ECOLAB INC Client Name JEFFREY K. PETERSON

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the 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 CHM (one per page)

16. Specific lobbying issues

CORPORATE TAX
PESTICIDES
FOOD SAFETY

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

U.S. HOUSE
U.S. SENATE

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

Name	Covered Official Position (if applicable)
~~JEFFREY~~ JEFFREY K. PETERSON	

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

Signature Jeffrey K. Peterson Date 8/16/04

Printed Name and Title JEFFREY K. PETERSON; DIRECTOR. GOVT. RELATIONS

Registrant Name _____ Client Name _____

Information Update Page - Complete ONLY where registration information has changed.

20. Client new address

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

City State/Zip (or Country)

22. New general description of client's business or activites

LOBBYIST UPDATE

23. Name of each previously reported individual who is **no longer** expected to act as a lobbyist for the client

ISSUE UPDATE

24. General lobbying issues previously reported that **no longer** pertain

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal Place of Busi (city and state or coun

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

FOREIGN ENTITIES

27. Add the following foreign entities

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	O pe cli

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

Signature _____ Date _____

Printed Name and Title _____