Clerk of the House of Representatives	Secretary of the Senate
Legislative Resource Center	Office of Public Records
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LOBBYING REPORT

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

1. Registrant Name
Sagamore Associates

2. Registrant Address ☐ Check if different than previously reported
Address **805 15th Street, NW** **Suite 700**
City **Washington,** State/Zip (or Country) **DC 20005** **USA**

3. Principal Place of Business (if different from line 2)
City State/Zip (or Country)

4. Contact Name	Telephone	E-mail (optional)	5. Senate ID #
Margaret Walker	**202-312-7400**		**34158-532**

7. Client Name ☐ Self	6. House ID #
Indiana Medical Device Manufacturers Council, Inc.	**30124045**

TYPE OF REPORT

8. Year **2001** Midyear (January 1-June 30) ☒ **OR** Year End (July 1-Dece

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 Lobbyir

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 ☒ >> $ **$20,000.00**
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 repo
period were:

Less than $10,000 ☐

$10,000 or more ☐ >> $ _____
Expenses (nearest $20,

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

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

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

☐ **Method C.** Reporting amounts under section 162(e
Internal Revenue Code

Signature _____ Date **8/14/01**

Mark Weller - Senior Vice President

[redacted]

Registrant Name: **Sagamore Associates**

Client Name: **Indiana Medical Device Manufacturers Council, Inc.**

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

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

16. Specific Lobbying issues
Medicare coding and payment issues
Medicare coverage process reform
Medicare modernization (S. 357, S. 358)

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

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

Name	Covered Official Position (if applicable)
Lowe, Serena	
Weller, Mark	

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

Signature _____ Date **8/14/01**

Mark Weller - Senior Vice President

