#### Rev. 11/2011

# OF TO SEA

### State of Idaho

Ben Ysursa Secretary of State

## LOBBYIST REPORT FORM

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Page	of	Page(s)
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## SECRETARY OF STATE STATE OF IDAHO

To Be Filed By:							
L-2	LOBBYISTS (Sec. 67-6619)						

	(Type or print clear See instructions a										
Lobbyist's name and permanent business address Andrea Willcuts 1909 46th Ave SW Seattle, WA 98116						e prepared 4/2013		Period of (Mo.)	year endi	ng (Yr.)	
								12	31	2012	
Item 1	Totals of all reporta	ble expenditures made	or incurred b	by Lobb	yist or	by Lobbyist's Emp	loyer on behalf	of Lobby	vist's Emplo	yer.	
Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported		*Total Amount for All Employers	Proportionate amounts co		unts contributed by each employer (Identify employers, under of page.)						
		7 th Employers	Employer No. 1		1	Employer No. 2	Employer No. 3		Employer No. 4		
Entertai Food an	nment d Refreshment	\$_\$0.00	\$_\$0.00			\$	\$		\$		
Living 1	Accommodations	\$0.00	\$0.00								
Adverti	sing	\$0.00	\$0.00		.		-				
Travel		\$0.00	\$0.00		.		-				
Telepho	ne	\$0.00	\$0.00								
Other E	xpenses or Services	\$0.00	\$0.00				-				
Total \$ \$0.00		\$ <u>\$0.00</u>	\$_\$0.00		\$	s		<u> </u>			
*When t	he number of employers you a	re reporting for requires m	ultiple L-2 fo	orms to b	e filed :	a total amount for all e	mnlovers should	he entered	l on Page 1		
***************************************	The totals of each expend									member(s)	
Item-	of their household.					Names of	f Legislators, Pub	lic and Ex	ecutive Offic	ials	
2	Date	Place	Amount		mount		and Household Members in Group				
ПС	ontinued on attached page(s)										
INSTRUCTIONS					Iten 3	n E	mployer(s) Name(s) and Address(es)				
<b>Who should file this form:</b> Any lobbyist registered under Section 67-6617 Idaho Code					Amylin Pharmaceuticals LLC						
					No. 1 9360 Towne Centre Dr San Diego CA 92121 USA						
Filir	ng deadline: Annual report Executive Lol	t is due on January 31st bbyist semi-annual repo		31st.	No. 2						
TO BE FILED WITH:  Ben Ysursa					No. 3						
Secretary of State PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282					No. 4						

Ţ.	Subje	ect matter of proposed legislat	ion, the number of the Senate	E LEGISLATIVE SUBJECT IDENTIFICATION			
Item		ouse Bill, Resolution or other					
4		obbyist was supporting or op		Code	Subject	Code	Subject
				01	Agriculture, horticulture,	17	Health service, medicine, drugs
	ubject Code   Bill, Resolution or Other   Appropriation Bill Number			farming, and livestock		and controlled substances, health	
(from t	om table) Legislative Ident. Number and Section Number		and Section Number	02	Amusements, games, athletics		insurance, hospitals
					and sports	18	Higher education
				03	Banking, finance, credit and	19	Housing, construction, codes
					investments	20	Insurance (excluding health
				04	Children, minors, youth,		insurance)
					senior citizens	21	Labor, salaries and wages,
				05	Church and religion		collective bargaining
				06	Consumer affairs	22	Law enforcement, courts,
				07	Ecology, environment, pollution,		judges, crimes, prisons
					conservation, zoning, land and	23	License, permits
					water use	24	Liquor
				08	Education	25	Manufacturing, distribution and
				09	Elections, campaigns, voting,		services
					political parties	26	Natural resources, forest and
				10	Equal rights, civil rights,		forest products, fisheries, mining
					minority affairs		and mining products
				11	Government, financing,	27	Public lands, parks, recreation
					taxation, revenue, budget,	28	Social insurance, unemployment
					appropriations, bids, fees, funds		insurance, public assistance,
				12	Government, county		workmen's compensation
				13	Government, federal	29	Transportation, highways,
				14	Government, municipal		streets and roads
				15	Government, special districts	30	Utilities, communications,
				16	Government, state		televisions, radio, newspaper,
							power, CATV, gas
						31	Other (please specify)
					ERTIFICATION: I hereby certify the breect statement in accordance with S		, 1
				_			
	L			_	Electronically signed		1/4/2013
5	contrac	y any rule, ratemaking decision of bid or bid process, financial obbyist was supporting or opp	l services agreement or	L	obbyist signature		Date
				Er	mployer No. 1 signature		Date
				Er	nployer No. 2 signature		Date
				Er	mployer No. 3 signature		Date
				Er Er	nployer No. 4 signature		Date