| Rev. 11/ | 2011 | | LOBBYI | ST MON | THL | Y RE | EPORT FORM | N | Page | | age(s) | |
|---|---------------------|---|------------------------------------|---------------|--|--|--|----------------|---|----------------|---------------|--|
| PAT | SEAL | State of Idal | To Be Filed By: | | | | | THIS SPACE | E FOR OFFICE US | SE ONLY | | |
| THE | PH PH | Ben Ysursa Secretary of State | | | | | BYISTS 67-6619) | | 12 FEB 14 PM 04:49 | | | |
| 9 | | | | | | | | | SECRETARY OF STATE STATE OF IDAHO | | | |
| | | (Type or print clear See instructions at | | | | | | | | | | |
| - | | nd permanent busine | ss address | | | | e prepared | | Period | covered | | |
| | er Stoll Kerner | | | | | 2/* | 14/2012 | | | month en | iding | |
| San R | afael, C | CA 94901 | | | | | | | (Mo | .) (Day) | (Yr.) | |
| | | | | | | | | | 1 | 31 | 2012 | |
| Item 1 | To | otals of all reportal | ble expenditures made o | or incurred b | y Lobb | oyist or | by Lobbyist's Emp | loyer on l | behalf of Lobb | oyist's Emplo | yer. | |
| Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity | | | *Total Amount for All Employers | | Proportionate amounts contributed by each employer (Identify employers, und Item 3, at bottom of page.) | | | | | rs, under | | |
| De | o Not Have | to be Reported | | Employer No. | | Employer No. 2 | | Employer No. 3 | | Employer No. 4 | | |
| Entertai Food ar | inment 1d Refres | hment | \$_\$0.00 | \$\$0.00 | | 9 | \$ | \$ | | \$ | | |
| Living | Accomm | odations | \$0.00 | \$0.00 | | - | | - | | | | |
| Adverti | sing | | \$0.00 | \$0.00 | | - | | - | | | | |
| Travel | | | \$0.00 | \$0.00 | | - | | - | | · | | |
| - | Telephone \$0.00 | | | | \$0.00 | | | | | | | |
| Other Expenses or Services \$0.00 | | | | \$0.00 | | | | - | | | | |
| | | Total | \$_\$0.00 | \$_\$0.00 | 0 | \$ | \$ | \$ | | \$ | | |
| *When | | | are reporting for requires n | - | | | | | | - | | |
| T . | | als of each expendence of their house | liture of more than one hold. | hundred do | llars (\$ | 5100) fo | r a legislator, other | holder of | f public office | e, executive o | officials and | |
| Item- 2 | Date | | | An | | mount | | | ators, Public and Executive Officials usehold Members in Group | | | |
| | Dute | | | | | | | und Hous | | III Group | | |
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| | | | | | | | | | | | | |
| Continued on attached page(s) | | | | | | | <u> </u> | | | | | |
| INSTRUCTIONS | | | | | | Item Employer(s) Name(s) and Address(es) | | | | | | |
| Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code | | | | | | | Allergan Inc No. 1 | | | | | |
| | | | | | | | 2350 Kerner Blvd Ste 250 San Rafael CA 94901 USA | | | | | |
| Filing deadline: Monthly reports due within fifteen (15) days of the month for activities of the past month. | | | | | | | | | | | | |
| TO BE FILED WITH: | | | | | | | | | | | | |
| Ben Ysursa Secretary of State | | | | | | No. 3 | | | | | | |
| PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282 | | | | | | No. 4 | | | | | | |
| L | | | | | | | | | | | | |

| Item | | ect matter of proposed legislati | | LEGISLATIVE SUBJECT IDENTIFICATION | | | | | | |
|--|--|--|---------------------------|--|--|---------|--|--|--|--|
| 4 | 1 | or House Bill, Resolution or other legislative activity in which | | Code Subject Code Subject | | | | | | |
| - | the L | obbyist was supporting or opp | posing. | | | | | | | |
| Subject | t Code | Bill, Resolution or Other | Appropriation Bill Number | 01 | Agriculture, horticulture, | 17 | Health service, medicine, drugs | | | |
| (from | | Legislative Ident. Number | and Section Number | 02 | farming, and livestock | | and controlled substances, health | | | |
| (110111 | table) | Legislative Ident. Number | | 02 | Amusements, games, athletics | 10 | insurance, hospitals | | | |
| | | | | 02 | and sports | 18 | Higher education | | | |
| | | | | 03 | Banking, finance, credit and | 19 | Housing, construction, codes | | | |
| | | | | 04 | investments Children minors youth | 20 | Insurance (excluding health | | | |
| | | | | 04 | Children, minors, youth, senior citizens | 21 | insurance) Labor, salaries and wages, | | | |
| | | | | 05 | Church and religion | 21 | collective bargaining | | | |
| | | | | 05 | Consumer affairs | 22 | Law enforcement, courts, | | | |
| | | | | 07 | Ecology, environment, pollution, | 22 | judges, crimes, prisons | | | |
| | | | | 07 | conservation, zoning, land and | 23 | License, permits | | | |
| | | | | | water use | 23 | Liquor | | | |
| | | | | 08 | Education | 25 | Manufacturing, distribution and | | | |
| | | | | 08 | Elections, campaigns, voting, | 23 | services | | | |
| | | | | 07 | political parties | 26 | Natural resources, forest and | | | |
| | | | | 10 | Equal rights, civil rights, | 20 | forest products, fisheries, mining | | | |
| | | | | 10 | 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) | | | |
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| | | | | CERTIFICATION: I hereby certify that the above is a true, complete and | | | | | | |
| Identify any rule, ratemaking decision, procurement, contract, | | | |] (| correct statement in accordance with | Section | 67-6624 Idaho Code. | | | |
| Item | bid or bid process financial services or hand labbyict was support | | | | | | | | | |
| 5 ing or opposing. | | | | | | | | | | |
| | | | | | Electronically signed | | 2/14/2012 | | | |
| NON | IE | | | Lobbyist signature | | | Date | | | |
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