Rev. 12/2012

LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

LOBBYISTS (Sec. 67-6619)

Page____of___Page(s) THIS SPACE FOR OFFICE USE ONLY

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SECRETARY OF STATE STATE OF IDAHO

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(Type or print clearly in black ink)

		e instructions at	bottom of page									
Lobbyist's name and permanent business address						Date prepared			Period covered			
	n Palmer				3/10/2014				month ending			
	Street SE								<u> </u>			
wasni	ington, DC	20003							(Mo.) (Day)	(Yr.)	
									2	28	2014	
Item 1	Totals	s of all reportal	ble expenditures made of	or incurred b	y Lobby	rist or b	y Lobbyist's Emp	loyer on behalf	of Lobb	yist's Emplo	yer.	
	tegory of Ex		*Total Amount for	Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)								
Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity			All Employers			<u> </u>						
Do	Not Have to be	e Reported		Employer No. 1			Employer No. 2 Emplo		er No. 3 Employer No. 4		r No. 4	
Entertai			o		•							
	d Refreshme		\$ \$0.00	\$_\$0.00		_ \$_		. \$		\$		
Living A	Accommodat	tions	\$0.00	\$0.00		_						
Adverti	sing		\$0.00	\$0.00		_						
Travel			\$0.00	\$0.00		_						
Telepho	one		\$0.00	\$0.00		_ _						
Other E	xpenses or S	ervices	\$0.00	\$0.00		_ _						
		Total	\$ \$0.00	\$ \$0.00	0	\$_		\$		\$		
			,	'		_		'				
*When t			are reporting for requires m									
			diture of more than one	hundred fiv	e dollars	(\$105) for a legislator, o	other holder of p	oublic of	ffice, executi	ive officials	
Item- and member(s) of their household.						Names of Legislators, Public and Executive Officials						
2 Date		Place	Amount		and Household Members in Group							
	Cantinuad on a	 attached page(s)										
	Zontinuca on a	mached page(s)				Item						
INSTRUCTIONS					L		Eı	mployer(s) Name	(s) and A	ddress(es)		
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code Filing deadline: Monthly reports due within fifteen (15) days of the month for activities of the past month.							Allergan, Inc.					
						No. 1						
						2525 Dupont Drive Irvine CA 92612 USA						
						No. 2						
TO BE FILED WITH:												
Ben Ysursa						No. 3						
Secretary of State PO Box 83720												
Boise, ID 83720-0080						No. 4						
Phone: (208) 334-2852 Fax: (208) 334-2282												

					TECTOL ACTIVE OF DESCRIPTION OF THE PROPERTY O						
Item	Subject matter of proposed legislation, the number of the Senate or House Bill, Resolution or other legislative activity in which			LEGISLATIVE SUBJECT IDENTIFICATION							
4				Code	Subject	Codo	Subject				
Subject (from 31	Code	Bill, Resolution or Other Legislative Ident. Number	Appropriation Bill Number and Section Number	01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16	Agriculture, horticulture, farming, and livestock Amusements, games, athletics and sports Banking, finance, credit and investments Children, minors, youth, senior citizens Church and religion Consumer affairs Ecology, environment, pollution, conservation, zoning, land and water use Education Elections, campaigns, voting, political parties Equal rights, civil rights, minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county Government, federal Government, special districts Government, state	20 21 22 23 24 25 26 27 28 29 30 31	Subject Health service, medicine, drugs and controlled substances, health insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective bargaining Law enforcement, courts, judges, crimes, prisons License, permits Liquor Manufacturing, distribution and services Natural resources, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public assistance, workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas Cother (please specify) Healthcare				
Item 5	bid or	tify any rule, ratemaking decision, procurement, contract, or bid process, financial services or bond lobbyist was supportor opposing.			CERTIFICATION: I hereby certify correct statement in accordance with Electronically signed Lobbyist signature						