Res 12 2016 1729		_		ONTHLY	REPOR	RT FORM	1	Page trus onse	of Page(s) trownerment secones	
State of Idal	30	ľ	fo Be Fil	ed By						
	Lawerence Denney Secretary of State		L-3 (Sec. 67-6619)		•	17 FEB 17 AMII		11:19	3	
(T.9)		<u>L</u>				STAT	ARY OF E OF ID	STAT AHO	Ĺ	
(Type or print clear See instructions at	bottom o	f page								
l obbyist's name and permanent busine	ss addres	\$		j	Date prepar	ręd		Period	l covered	
Adapt Pharma, Inc. c/o Politicom Law LLP							2/17/17		month ending	
28 Liberty Ship Way, Suite 2815								(Mc) (Day) (Yr)	
Sausalito, CA 94965									31 2017	
Item I I I I I I I I I I I I I I I I I I I							·····	1		
1 rotals of all reportal	ale expe	nditures made (, ,			-			
Category of Expenditure Rembursed Personal Living and Travel	*To	tal Amount for		tionale amounts i, at bottom of p		I by each emplo	oyer (lifentify	employer	s, under	
Expenses Pertaining to Unboying Activity Do Not Have to be Reported	All Umployers		Employer No. 1		I mplayer No. 2		Employer No. 3 Employer No. 4		1 imployer No. 4	
Entertainment Food and Refreshment	š	0.00	s	0.00	5		S		5	
]	0.00		0.00	.		3	***************************************	. -	
				U.UU	1		i		1	
Living Accommodations			-						-	
Advertising		0.00		0.00		r Agandas ka Pilas ka 1, As arril 11 Ag 1 Pilas ka ka ka 1 As	ch No. 144 de Al 1111 commo de combac			
Advertising Travel		0.00		0.00 0.00	**************************************					
Advertising Travel Telephone		0.00 0.00 0.00	Management	0.00 0.00 0.00						
Advertising Travel		0.00		0.00 0.00						
Advertising Travel Telephone	5	0.00 0.00 0.00	S	0.00 0.00 0.00	5	0.00	s	00	s	
Advertising Travel Telephone Other Expenses or Services Total		0.00 0.00 0.00 0.00		0.00 0.00 0.00 0.00	- ''		,		13	
Advertising Travel Telephone Other Expenses or Services Total *When the number of employers you a The totals of each expense and member(s) of their least	ire report	0.00 0.00 0.00 0.00 0.00 for requires in	uluple I	0.00 0.00 0.00 0.00 0.00	ed a total a	mount for all c	mplovers abou	ild be enter	red on Page 1	
Advertising Travel Telephone Other Expenses or Services Total *When the number of employers your	ire reporte diture of ouschole	0.00 0.00 0.00 0.00 0.00 for requires in	uluple I	0.00 0.00 0.00 0.00 0.00	ed a total a	mount for all c 1 legislator, o	mplovers about	ild be enter I public c	red on Page 1	

Continued on attached page(s) Item 3 Employer(s) Name(s) and Addressvest INSTRUCTIONS Adapt Pharma, Inc., No. 1 28 Liberty Ship Way, Suite 2815, Sausalito, CA 94965 Who should file this form: Any lobby ist registered under Section 67-6617 Idaho Code Filing deadline: Monthly reports due within fifteen (15) days of the No 2 month for activities of the past month. TO BE FILED WITH Lawerence Denney No 3 Secretary of State PO Box 83720 Boise, 1D 83720-0080 No 4 elections a sos idaho gov

To: 12083342282 From: 14156107604 Date: 02/17/17 Time: 10:16 AM Page: 03/03

Subject matter of proposed legislation, the number of the Senate **LEGISLATIVE SUBJECT IDENTIFICATION** Hen or House Bill, Resolution or other legislative activity in which the Lobbyist was supporting or opposing Code Subject Code Subject 01 Agriculture, hornculture, 17 Health service, medicine, drugs Subject Code Bill, Resolution or Other Appropriation Bill Number farming, and hyestock and controlled substances, health (from table) Legislative Ident, Number and Section Number Antisements, games, athletics insurance, hospitals and sports Higher education Banking, finance, credit and Housing, construction, codes investments Insurance (excluding health 04 Children, mmors, youth, insurance) senior citizens Labor, salaries and wages, 05 Church and religion collective bargaining Consumer affairs Law enforcement, courts Teology, environment, pollution, judges crimes, prisons conservation, zoning, fand and License, permits water use 7.1 Lequor Education 25 Manufacturing, distribution and Elections, campaigns, voing, SCEVICES political parties Natural resources, forest and Found rights, civil rights, forest products, fisheries, intning minority allairs and mining products Government, financing, Public lands, parks, recreation taxation, revenue, budget, Social insurance, unemployment appropriations, bids, fees, funds insurance public assistance. 12 Government, county workmen's compensation 13 Government, federal Transportation, highways, Government, municipal streets and roads Government, special districts Utilities, communications, Government, state televisions, radio, newspaper, power, CATV, gas Other (please specify) CERTHICATION. Thereby certify that the above is a true, complete and correct statement in accordance with Section 67-6624 Idaho Code. Identify any rule, ratemaking decision, procurement, contract, Item bid or bid process, financial services or bond lobby ist was supporting or opposing