

SECRET  
**LOBBYING REPORT**

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

1. Registrant Name POLICY DIRECTIONS INC.			
2. Address <input type="checkbox"/> Check if different than previously reported 818 Connecticut Avenue, N.W., Suite 225, Washington, D. C. 20006			
3. Principal Place of Business (if different from line 2) City: Same as above State/Zip (or Country)			
4. Contact Name	Telephone	E-mail (optional)	5. Sec
Frankie L. Trull	202-776-0071	fltrull@poldir.com	3174
7. Client Name <input type="checkbox"/> Self			6. Hous
AMGEN, INC.			3211

**TYPE OF REPORT** 8. Year 2002 Midyear (January 1-June 30)  OR Year End (July

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 Lol

**INCOME OR EXPENSES - Complete Either Line 12 OR Line 13**

<p><b>12. Lobbying Firms</b></p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> ⇨ \$ <u>40,000.00</u> Income (nearest \$20,000)</p> <p>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).</p>	<p><b>13. Organizations</b></p> <p>EXPENSES relating to lobbying activities for th period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ _____ Expenses (ne</p> <p><b>14. REPORTING METHOD.</b> Check box to inc accounting method. See instructions for descripti</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA de</p> <p><input type="checkbox"/> Method B. Reporting amounts under section Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section Internal Revenue Code</p>
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Signature Frankie L. Trull

Printed Name and Title Frankie L. Trull, President



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

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

16. Specific lobbying issues

Medicare Drug Benefit

Medicare Reimbursement

Generic drug legislation

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

House of Representatives  
U. S. Senate

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

Name	Covered Official Position (if applicable)
Frankie L. Trull	
Kathleen (Kay) Holcombe	

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

Signature Frankie L. Trull Date AUGUST 12, 2008  
Printed Name and Title Frankie L. Trull, President

