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SECRETARY OF T

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LOBBYING REPORT

1. Registrant name	/	, \	\
Prefix Ms. First Laurel A. Last L	_indstrom/	1co t	anners
2. Address Check if different than previously reported			
Address1 710 10th Street NE			
City Washington State	DC Zip Cod	e 20002	Country US
3. Principal place of business (if different than line 2)			
City State City State	Zip Cod e/Zip or Country	c	Country
4a. Contact Name b. Telephone number Prefix Full Name	c. E-mail		5. Senate ID#
	cko@hillcopartners.com		
7. Client Name Self		***************************************	6. House ID#
Amgen			
9. Check if this filing amends a previously filed version of this report 10. Check if this is a Termination Report □ ⇒ Termination Da		OR Y	
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9. Check if this filing amends a previously filed version of this report 10. Check if this is a Termination Report □ □ Termination Da INCOME OR EXPENSES - Complete Either Line	12 OR Line 13	13. Org	11. No Lobbying Acti
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Page 1

Registrant Name _	Laurel A. Lindstrom		Client Name	Amgen
engaged in lobb		ient during the rep	orting period. Us	he general issue areas in which the r sing a separate page for each code
15. General issu	e area code	edicare/Medicaid		_ (one per page)
16. Specific lob	bying issues			·
Treatment of	f drugs and biologics un	der the hospital out	tpatient rule and o	other CMS rulemaking
Centers for Mount of the V	Congress and Federal a edicare and Medicaid Servent of Health and Human S White House	vices Services		
First Name	Name Last Name	Suffix	Covered (Official Position (if applicable)
Laurel A.	Lindstrom			
Marc B.	Samuels			

19. Interest of e	ach foreign entity in th	e specific issues li	sted on line 16 a	bove Check if None

 $f_{nt}^{(a)}$ Printed Name as $f_{nt}^{(a)}$ LD-2DS (Rev. 4.06)

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