



Louisiana Board of Ethics: Lobbyist Registration Form

Registration Year: 2014

Lobbying Type(s): Legislative

Demographic Information:

Lobbyist's Name: DAVID WILLIAM POOLE

Lobbyist ID: LB002433

Name Change: _____

Address:

Street: 1825 COUNTRY CLUB DRIVE

City: TALLAHASSEE

State: Florida

Zip: 32301

Phone: 850-766-3323

Ext: _____

Fax: 850-877-6422

Employer Information:

Employer Name: AIDS Healthcare Foundation

Employer Address:

Street: 110 SE 6th Street, Suite 1960

City: Ft Lauderdale

State: Florida

Zip: 33301

Registration Details:

Lobbying Type: Legislative Branch Lobbying

Date of the first action which required your registration as a lobbyist: 5/07/2014

(The date in which you acted in a representative capacity and made an expenditure on an executive branch official.)

Information about persons, groups, or organizations represented:

Representative Name: AIDS Healthcare Foundation

Description: Healthcare, pharmacy, health plans

Street: 110 SE 6th Street, Suite 1960

City: Ft Lauderdale

State: Florida

Zip: 33301

Branch: Legislative

Employment Start Date: 12/31/2013

Lobbying Start Date: 1/6/2014

Paid by Representation: Yes

Payment Category: \$100,000 - \$249,999

End Date: _____

If No, who pays you: _____

Subject Matters:

Health care; pharmaceutical and medical devices; research; development; sales

Information about Business Relationships

Not Applicable