Lobbyist Registration Form Louisiana Board of Ethics



Demographic Information:							
Title	e: n/a	Lobbyist ID: LB00000575					
First Name: Sco	tt	Last Name: Sabrsula		_ Middle Name:			
ange First Name:		Change Last Na	me:	_ Change Middle Name:			
Branch: Ex	ec						
Address Inform	nation:						
Stree	t: 10453 Ember Gl	en Drive					
Cit	y: Austin		State: Texas	Zip Code:	78726		
Emai	I: ssabrsul@amger	n.com					
Phone	: 512-996-0034	Ext:					
Fax	512-996-0322	_					
Employer Infor	mation:						
Employer N	Name: Amgen						
Addres	s Information:						
Street:	601 13th Street N	W, 12th Floor					
City:	Washington		State: District of	Zip Code: 20	)005		



Information about person, group or organization which you represent:

Representative Name : Amgen

Branch: Exec

Business Description : Pharmaceutical manufacturing and biotechnology

Address:	Street: 601 13th Street NW, 12th Floor					
City: Washington		State: District of Columbia	Zip Code: 20005			
Paid by representation: Yes		Payment Category: \$24,999 or less				
If <b>No,</b> who pays you:						
Subject Matter 1: Health care: pharmaceutical and medical devices; research; development; sales						
Subject Matte	er 2:					
Subject Matte	er 3:					

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Picture:

