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**LOBBYING REGISTRATION**

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration 1. Effective Date of Registration **01/01/200**

2. House Identification Number

Senate Identification Number

**REGISTRANT**

3. Registrant name **Patton Boggs LLP**  
 Address **2550 M Street, NW**  
 City **Washington** State **DC** Zip **20037**
4. Principal place of business (if different from line 3)  
 City State/Zip (or Country)
5. Telephone number and contact name  
**James B. Christian** Contact **202-457-6484** E-mail (optional)
6. General description of registrant's business or activities  
**Law firm**

**CLIENT**

7. Client name **Amylin Pharmaceuticals, Inc.**  
 Address **9360 Towne Centre Drive**  
 City **San Diego** State **CA** Zip **92121**
8. Principal place of business (if different from line 7)  
 City State/Zip (or Country)
9. General description of client's business or activities  
**A biopharmaceutical company engaged in the discovery, development and commercialization of innovative me**

**LOBBYISTS**

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any person has served as a "covered executive branch official" or "covered legislative branch official" within two years of becoming a lobbyist for the client, *state the executive and/or legislative position(s) in which the person served.*

Name	Covered Official Position (if applicable)
<b>Kathy Means</b>	



Name **Patton Boggs LLP**

Client Name **Amylin Pharmaceuticals, Inc.**

**LOBBYING ISSUES**

11. General lobbying issue areas. Select all applicable codes listed in instructions and on reverse side of Form LD-1, page 1  
MMM

12. Specific lobbying issues (current and anticipated)  
**Federal Health Policy Issues**

**AFFILIATED ORGANIZATIONS**

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the registrant in and in whole or in major part plans, supervises or controls the registrant's lobbying activities?

No ⇨ Go to line 14.

Yes

Complete the rest of this section matching the criteria above, then line 14.

Name	Address	Principal Place of (city and state or

**FOREIGN ENTITIES**

14. Is there any foreign entity that:

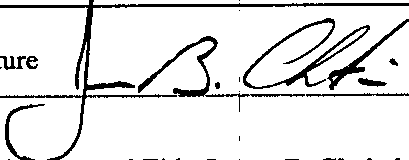
- a) holds at least 20% equitable ownership in the client or any organization identified on line 13; or
- b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or sub: the client or any organization identified on line 13; or
- c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in the o lobbying activity?

No ⇨ Sign and date the registration

Yes

Complete the rest of this section fo matching the criteria above, then si registration.

Name	Address	Principal place of business (city and state or country)	Amount of contributi for lobbying activitie

Signature 

Date: 08/15/2005

Printed Name and Title **James B. Christian, Partner**

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