EXECUTIVE LOBBYING REGISTRATION/ RENEWAL FOR THE YEAR OF 2007
(Fill in year.)

545
Executive Lobbyist Registration No.

FOR OFFICE USE ONLY
Postmark Date: 7/13/07
Reg 2007
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SCANNED
JUL 18 2007
By: (J)
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Instructions

- Print in ink or type.
- Complete form and return with $110 registration fee to the Board of Ethics, 2415 Quail Dr., 3rd Floor, Baton Rouge, LA 70808, (225) 763-8777 or (800) 842-6630.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Registrations expire as of December 31 unless a renewal is submitted between December 1 and January 31.

1. NAME CROFT (Last) DAVID (First) A (MI)

2. BUSINESS PHONE 270-217-0224 (Area Code and Phone Number)

3. FAX NUMBER 270-534-4591

4. BUSINESS ADDRESS 445 Ashcreek Rd (Street and No.) PADUCAH (City) KY (State) 42001 (Zip)

MAILING ADDRESS SAME (Street and No.) (City) (State) (Zip)

5. EMPLOYER BRISTOL-MYERS SQUIBB

6. EMPLOYER'S ADDRESS 777 Scudders Mill Rd. (Street and No.) Plainsboro (City) NJ (State) 08536 (Zip)

7. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name BRISTOL-MYERS SQUIBB - JOHN RYAN Sr Counsel
Address 655 15th ST NW Suite 300 WASHINGTON, DC 20005
Business or purpose Pharmaceuticals
Does this person pay you? Yes - BMS.
If No, who pays you?

EXECUTIVE LOBBYING REGISTRATION FORM

Executive Lobbyist Registration No. _____

2. Name_____

   Address_____

   Business or purpose_____

   Does this person pay you?_____

   If No, who pays you?_____

3. Name_____

   Address_____

   Business or purpose_____

   Does this person pay you?_____

   If No, who pays you?_____

4. Name_____

   Address_____

   Business or purpose_____

   Does this person pay you?_____

   If No, who pays you?_____

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief, and that no information required by LSA-R.S. 49:71 et seq. has been deliberately omitted.

_____
Signature of Lobbyist