Renewal 2008

EXECUTIVE LOBBYING REGISTRATION/RENEWAL FOR THE YEAR OF 2008
(Fill in year.)

284
Executive Lobbyist Registration No.

FOR OFFICE USE ONLY
Postmark Date: 1/29/08
Ren-08
ck# 6020
$110.00
ACK
3071198

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 Settle Chérie M.
Last First MI

2. BUSINESS PHONE (985) 624-3584
Area Code and Phone Number

3. FAX NUMBER (985) 624-3586

4. BUSINESS ADDRESS 1881 Logan Lane Mandeville, Louisiana 70448
Street and No. City State Zip

MAILING ADDRESS
Street and No. City State Zip

5. EMPLOYER MGI Pharma

6. EMPLOYER'S ADDRESS 5775 West Old Shakopee Road, Ste 100 Bloomington, MN 55437-3174
Street and No. City State 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 MGI Pharma
Address 5775 West Old Shakopee Road Ste 100
Business or purpose Sell Gliadel to neurosurgery & neuro-oncology
Does this person pay you? Yes
If No, who pays you?

Form 504, Rev. 7/04

Missing numbered pages were blank and had no information on them.

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.

Cherie Settle

Signature of Lobbyist

ATTACH
2" x 2"
PHOTOGRAPH
HERE