



FORM  
LOB  
(Rev. 5/2013)

STATE OF HAWAII  
STATE ETHICS COMMISSION



HAWAII STATE ETHICS COMMISSION  
LOBBYIST'S EXPENDITURES AND CONTRIBUTIONS REPORT

REPORT YEAR: 2014  Amended Statement  
 For Lobbying Reporting Period:  January 1 - last day of February  March 1 - April 30  May 1 - December 31

LOBBYIST INFORMATION

Lankford Elizabeth  
 Last Name First Name M.I.  
 Healthcare Distribution Management Association  
 Lobbyist Firm/Employer  
 901 N. Glebe Road  
 Suite 1000  
 Mailing Address (Number and Street or P.O. Box)  
 Arlington VA 22203  
 City State Zip Code  
 (703) 787-0000 elankford@hdmanet.org  
 Telephone Extension Email Address

PART I. TOTAL EXPENDITURES (Attached Additional Sheets As Needed)  
 EXPENDITURES (ROUND TO THE NEAREST DOLLAR) MADE BY LOBBYIST FOR EACH ORGANIZATION REPRESENTED

Organization's Names	Preparation & Distribution of Lobbying Materials	Media Advertising	Postage	Fees Paid to Lobbyist	Entertainment & Events	Receptions, Meals, Food & Beverages	Gifts	Loans	Other Disbursements	EXPENDITURES	TOTAL
1. Healthcare Distribution	0	0	0	0	0	0	0	0	0	0	0
2. Management Association											
3.											
4.											
5.											
6.											
7.											
8.											
9.											
10.											
11.											
12.											
13.											
14.											
15.											
16. Total Expenditures from Additional Attached Sheet(s)											0
Add Total Expenditures (lines 1 through 16)											0

REC'D BY email

