

**HAWAII STATE ETHICS COMMISSION**

1001 BISHOP STREET, HONOLULU, HAWAII 96813  
 or P. O. BOX 616, HONOLULU, HAWAII 96809  
 TEL: (808) 587-0460 FAX: (808) 587-0470  
 email: [ethics@hawaiiethics.org](mailto:ethics@hawaiiethics.org)  
 Web site: [www.hawaii.gov/ethics](http://www.hawaii.gov/ethics)

THIS SPACE FOR OFFICE USE ONLY

\*14 AUG 22 AIO :44

STATE OF HAWAII  
STATE ETHICS COMMISSION

NOTE: This is a public document.

**LOBBYIST REGISTRATION FORM**

(Type or Print Clearly)

<b>PART I LOBBYIST</b>			
NAME (Last)	(First)	(Middle)	TELEPHONE
Ito	Mihoko	E.	808-539-0400
MAILING ADDRESS (Street)			FAX 808-533-4945
1099 Alakea Street, Suite 1400			EMAIL mito@awlaw.com
(City)	(State)	(Zip Code)	
Honolulu	HI	96813	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Slovin & Ito, LLP			808-539-0400
MAILING ADDRESS (Street)			FAX 808-533-4945
1099 Alakea Street, Suite 1400			EMAIL
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96813	

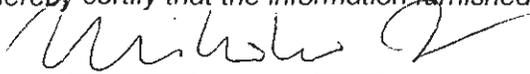
<b>PART II ORGANIZATION</b>			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Armedica, Inc.			617-528-5018
MAILING ADDRESS (Street)			FAX 617-585-9923
800 Boylston Street, Suite 3500			EMAIL PCifarelli@exeter.com
(City)	(State)	(Zip Code)	
Boston	MA	02199	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Philip L. Cifarelli, Chief Financial Officer			617-528-5018
MAILING ADDRESS (Street)			FAX 617-585-9923
800 Boylston Street, Suite 3500			EMAIL PCifarelli@exeter.com
(City)	(State)	(Zip Code)	
Boston	MA	02199	

**PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY**

- |  |  |   |  |
|--|--|---|--|
| <input type="checkbox"/> Agriculture                               | <input type="checkbox"/> Education                                 | <input checked="" type="checkbox"/> Human Services                          | <input checked="" type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities         | <input checked="" type="checkbox"/> Government Operation & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation                                  |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs                          | <input type="checkbox"/> Labor & Employment                                 | <input type="checkbox"/> Transportation  |
| <input type="checkbox"/> Culture, Arts, Historic Preservation      | <input type="checkbox"/> Health                                    | <input type="checkbox"/> Planning, Land & Water Use Management              | <input type="checkbox"/> Other: (indicate below)                               |
| <input type="checkbox"/> Ecology, Energy Environmental Protection  | <input type="checkbox"/> Housing                                   | <input type="checkbox"/> Public Safety & Corrections                        | _____  |

**PART IV CERTIFICATION OF LOBBYIST**

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.



8/18/2014

(Signature of Lobbyist)

(Date)

**PART V AUTHORIZATION TO LOBBY**

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
Philip L. Cifarelli	Chief Financial Officer

NAME OF ORGANIZATION (if applicable)  
Armedica, Inc.

TELEPHONE  
617-528-5018

MAILING ADDRESS (Street)  
800 Boylston Street, Suite 3500

FAX 617-585-9923

EMAIL  
PCifarelli@exeter.com

(City)

(State)

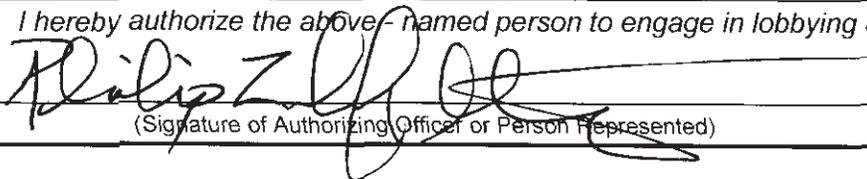
(Zip Code)

Boston

MA

02199

I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.



(Signature of Authorizing Officer or Person Represented)

Aug 7, 2014

(Date)