

**HAWAII STATE ETHICS COMMISSION**

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 or P.O. BOX 616, HONOLULU, HAWAII 96809
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 Web site: www.hawaii.gov/ethics

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STATE OF HAWAII
STATE ETHICS COMMISSION

NOTE: This is a public document.

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Yajima	Tiffany	N.	808-539-0400
MAILING ADDRESS (Street)			FAX 808-533-4945
1099 Alakea Street, Suite 1400			EMAIL tyajima@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	

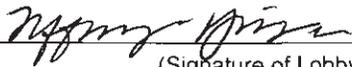
PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Armedica, Inc.			617-528-5018
MAILING ADDRESS (Street)			FAX 617-585-9923
800 Boylston Street, Suite 3500			EMAIL PCifarelli@exeter.com
(City)	(State)	(Zip Code)	
Boston	MA	02199	
NAME OF PERSON RESPONSIBLE FOR 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.



 (Signature of Lobbyist)

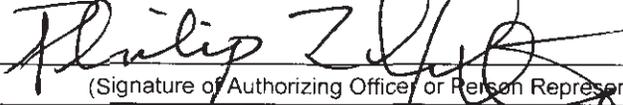
8/18/14

 (Date)

PART V AUTHORIZATION TO LOBBY

NAME Philip L. Cifarelli		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED 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) Boston	(State) MA	(Zip Code) 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)