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
Web site: www.hawaii.gov/ethics

THIS SPACE FOR OFFICE USE ONLY
'14 DEC 30 P1:21
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
Murakami	Linda		303-388-6539
MAILING ADDRESS (Street)			FAX
201 Krameria Street			EMAIL linda.sikkema@astrazeneca.com
(City)	(State)		(Zip Code)
Denver	Colorado		80220
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
N/A			
MAILING ADDRESS (Street)			FAX
			EMAIL
(City)	(State)		(Zip Code)

PART II ORGANIZATION

NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
AstraZeneca Pharmaceuticals, LP		302-886-3000
MAILING ADDRESS (Street)		FAX 302-886-5015
1800 Concord Pike		EMAIL jacqueline.kirby@astrazeneca.com
(City)	(State)	(Zip Code)
Wilmington	Delaware	19850
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
Carrie Castro		703-684-1110
MAILING ADDRESS (Street)		FAX 703-684-7912
MultiState Associates Inc., 515 King Street, Suite 300		EMAIL ccastro@multistate.com
(City)	(State)	(Zip Code)
Alexandria	Virginia	22314

REC'D BY FedEx

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

☐ Agriculture	☐ Education	☑ Human Services	☐ Science, Technology & Economic Development
☐ Communications & Public Utilities	☐ Government Operation & Finance	☐ Intergovernmental Relations, International Affairs	☐ Tourism & Recreation
☑ Consumer Protection & Commerce	☑ Hawaiian Affairs	☐ Labor & Employment	☐ Transportation
☐ Culture, Arts, Historic Preservation	☑ Health	☐ Planning, Land & Water Use Management	☐ Other: (indicate below)
☐ Ecology, Energy Environmental Protection	☐ Housing	☐ 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.

Linda Murakami — 12/13/2014

(Signature of Lobbyist) (Date)

PART V AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
Jacqueline Kirby	Vice President, Government Affairs

NAME OF ORGANIZATION (if applicable)	TELEPHONE
AstraZeneca Pharmaceuticals, LP	302-885-2319
MAILING ADDRESS (Street)	FAX 302-886-5015
1800 Concord Pike	EMAIL jacqueline.kirby@astrazeneca.com

(City)	(State)	(Zip Code)
Wilmington	Delaware	19850

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

Jacqueline Kirby — 12/12/14

(Signature of Authorizing Officer or Person Represented) (Date)