

HAWAII STATE ETHICS COMMISSION
 1001 BISHOP STREET, ASB TOWER 970
 P.O. BOX 616, HONOLULU, HAWAII 96809
 TEL: 587-0460 FAX: 587-0470
 email: ethics@hawaiiethics.org

THIS SPACE FOR OFFICE USE ONLY

LOB-P0065
 ORG-P0030
 '09 OCT 16 P12:59

STATE OF HAWAII
 STATE ETHICS COMMISSION

NOTE: This is a public document.

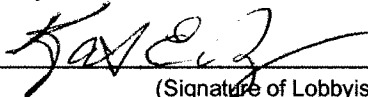
LOBBYIST REGISTRATION FORM

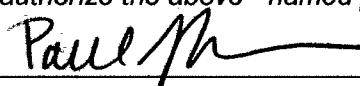
(Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Perry	Kathryn	E	916-658-0144
MAILING ADDRESS (Street)			FAX 916-658-0155
925 L Street, Suite 1200			EMAIL kassy@perry.com
(City)	(State)	(Zip Code)	
Sacramento	California	95814	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Perry Communications Group, Inc.			916-658-0144
MAILING ADDRESS (Street)			FAX 916-658-0155
925 L Street, Suite 1200			EMAIL kassy@perry.com
(City)	(State)	(Zip Code)	
Sacramento	California	95814	

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Pharmaceutical Research and Manufacturers of America (PhRMA)			202-835-3428
MAILING ADDRESS (Street)			FAX 202-715-7030
950 F Street, NW, Suite 300			EMAIL plarsen@phrma.com
(City)	(State)	(Zip Code)	
Washington	DC	20004	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Brian Cassidy, Compliance Associate			330-761-9960
MAILING ADDRESS (Street)			FAX 330-761-9965
State and Federal Communications, Inc. 80 South Summit Street, Suite 100			EMAIL bcassidy@stateandfed.com
(City)	(State)	(Zip Code)	
Akron	Ohio	44308	

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY			
<input type="checkbox"/> Agriculture	<input type="checkbox"/> Education	<input type="checkbox"/> Human Services	<input type="checkbox"/> Science, Technology & Economic Development
<input type="checkbox"/> Communications & Public Utilities	<input type="checkbox"/> Government Operation & Finance	<input type="checkbox"/> Intergovernmental Relations, International Affairs	<input type="checkbox"/> Tourism & Recreation
<input 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 checked="" type="checkbox"/> Health	<input type="checkbox"/> Planning, Land & Water Use Management	<input checked="" type="checkbox"/> Other: (indicate below) <u>pharmaceuticals</u>
<input type="checkbox"/> Ecology, Energy Environmental Protection	<input type="checkbox"/> Housing	<input type="checkbox"/> Public Safety & Corrections	

PART IV CERTIFICATION OF LOBBYIST	
<i>I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.</i>	
Kathryn E. Perry: 	<u>10-14-09</u>
(Signature of Lobbyist)	(Date)

PART V AUTHORIZATION TO LOBBY		
NAME Paul Larsen	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED Assistant General Counsel and Deputy Compliance Officer	
NAME OF ORGANIZATION (if applicable) Pharmaceutical Research and Manufacturers of America (PhRMA)	TELEPHONE 202-835-3428	
MAILING ADDRESS (Street) 950 F Street, NW, Suite 300	FAX 202-715-7030	EMAIL
	(City) Washington	(State) DC
	(Zip Code) 20004	
<i>I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.</i>		
Paul Larsen: 	<u>10/12/09</u>	
(Signature of Authorizing Officer or Person Represented)	(Date)	