

925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

HONOLULU ETHICS COMMISSION RECEIVED

31.19.18

"18 JAN 16 P2:44

ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST				
NAME (Last) (First) (Middle)				TELEPHONE
Kaakua, Laura Hokunani Edmunds			8085248562	
MAILING ADDRESS (Street) The Trust for Public Land, 1003 Bishop Street, Suite 740			FAX 8085248565	
·	,			EMAIL laura.kaakua@tpl.org
(City) _{Honolulu} (State) _{Hawaii}			(Zip Code) 96813	
LOBBYIST FIRM/EMPLOYE	R (Fill in only if yo	ou are employed by a busines	ss entity that has been retained to lobby)	TELEPHONE
MAILING ADDRESS (No. an	d Street or	P.O Box)		FAX
				EMAIL
(City)		(State)		(Zip Code)
PART II ORGANIZA				
NAME OF ORGANIZATION	YOU LOBE	BY FOR (Do not a	bbreviate)	TELEPHONE
The Trust for Public Land /				8085248562
MAILING ADDRESS (No. an 1003 Bishop Street, Suite 740	d Street or	P.O Box)		FAX 8085248565
				EMAIL laura.kaakua@tpl.org
(City) Honolulu		(State) Hawaii		(Zip Code) 96813
DADT III EVDENDITI	UDEC E	V TVDE		
PART III EXPENDIT		STITPE		
	Amount		Receptions, Meals, Food & Beverages	Amount 0
of Lobbying Materials	Amount		Media Advertising	Amount 0
I	Amount		Other ₀	
			TOTAL \$0	

Fees		Amount 0	
Compensation		Amount 0	
Contributions		Amount 0	* * * * * * * * * * * * * * * * * * * *
Membership Fees		Amount 0	·
☐ Check here if additional sheets are attached		⊠ n/a	
PART V DESCRIPTIO	N OF SUBJECTS	ON WHICH	YOU LOBBIED
□Business & Economic Development	□Community Serv	ices	□Customer Services
□Culture & Arts	□Housing		□Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism
		-	☐Specific Legislation:
□Transportation	□Zoning & Plannir	ng	Bill No. (Year) Reso No. (Year) Admin. Rule No.
	an wilter & Natural		
PART VI POLICY MAP	(ING PROCESS D	ECISIONS	nd to Mulis
PART VI POLICY MAKINFLUENCE AND OUT 1. Clean Water and Natural Lands	(ING PROCESS D	ECISIONS	nd to Mulis
PART VI POLICY MAP INFLUENCE AND OU ¹ . Clean Water and Natural Lands 2.	(ING PROCESS D	ECISIONS	nd to Mulis
PART VI POLICY MAKINFLUENCE AND OUT 1. Clean Water and Natural Lands 2. 3.	(ING PROCESS D	4.	nd to Mulis
PART VI POLICY MAKINFLUENCE AND OUT 1. Clean Water and Natural Lands 2. 3.	(ING PROCESS D TCOME Fund projects	4.	YOU SOUGHT TO
PART VI POLICY MAP INFLUENCE AND OU ¹ . Clean Water and Natural Lands 2.	CERTIFICATION ag statements are true	4. 5. Check her	YOU SOUGHT TO The if additional sheets are attached and sworn to before me any of UANUARY . 2018.
PART VI POLICY MAP INFLUENCE AND OU 1. Clean Water and Natural Lands 2. 3. PART VII LOBBYIST Of the Proposition of the Propos	(ING PROCESS DETCOME Fund projects CERTIFICATION	5. Check her	YOU SOUGHT TO The if additional sheets are attached The if if additional sheets are attached The if



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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

18 JAN -3 P2:03

		(Typo of Time	Oldary,	
PART I LOBBYIST				
NAME (Last) (First) (Middle) /		^	TELEPHONE
Kahele MAILING ADDRESS (Street	Helvi	n No	on choy	3814658
MAILING ADDRESS (Street	t)	X		FAX 6716901
94-497 4 Ke	2 5T			ÊMAII .
			×	iw mel@yahoo, ((Zip Gode)
(City)		(State)		(Zip Code)
Wai Pahu LOBBYIST FIRM/EMPLOY		Hi	8	TELEPHONE
			iness entity that has been retained to lobby)	
Trun WOV KINS MAILING ADDRESS (No. a	STab	Fund		381 4658
				FAX 6716901
94-497 UK	10 9	F		EMAIL
		,		(Zip Code)
(City)		(State)		(Zip Code)
waipahu		HI		96797
PART II ORGANIZA	TION			7 7 11 54 54 11 11 11 11 11
NAME OF ORGANIZATION	YOU LOB	BY FOR (Do not	t abbreviate)	TELEPHONE
thon Worker	Staf	Eund.		game
Trun Worker MAILING ADDRESS (No. 8	ınd Street o	r P.O Box)		FAX / ſ
Same	as a	above		
) = 0,000				EMAIL , ,
(City)		(State)	acres mais	(Zip Code)
- N				
PART III EXPENDIT	TURES,	BY TYPE		
Political Contributions	Amount	Sept 1	Receptions, Meals, Food & Beverages	Amount
Preparation & Distribution	Amount		Media Advertising	Amount
of Lobbying Materials Entertainment & Events	Amount		Other	
Entertainment & Events	Amount		Other	8102121
			TOTAL	

Deadline: January 10th of Each Year NOTE: This is a public document

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING			
Fees	0	Amount	0
Compensation	D	Amount	0
Contributions		Amount	
Membership Fees O		Amount O	
☐ Check here if additional sheet	ts are attached	□ n/a	
PART V DESCRIPTION	OF SUBJECTS	ON WHICH	YOU LOBBIED
Business & Economic Development	Community Servi	ces	Customer Services
Culture & Arts	Housing		Public Works, Infrastructure & Sustainability
AParks & Recreation	Public Health, Sa	fety & Welfare	Tourism
			☐Specific Legislation:
Transportation ZZoning & Plannin		g	Bill No(Year) Reso No(Year) Admin. Rule No Dept
□Other (indicate below):			
PART VI POLICY MAKIN		ECISIONS	YOU SOUGHT TO
1. Mass Transit		4.	
2. Housing		5.	
3.	,	☐ Check here if additional sheets are attached	
PART VII LOBBYIST CE	RTIFICATION		
I hereby certify that the foregoing s		Subscribed and sworn to before me	
and correct.		This 2rdday of January, 2010.	
Mu Clan LOBBYIST SIGNATURE	her	By: NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS	
1/2/2018 DATE		My commission expires: 09/02/20 See attached nutary	
			Document.

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STATE OF HAWAII	}
COUNTY OF HONOLULU	} SS. }
MEWIN YC KAHELE,	20 6, before me personally appeared to me known to be the person described in and we ent and acknowledgment thathe executed the same
Witness my hand and seal. NOTARY PUBLIC (SEAL) Comm. No. 12-295	EMILY MORTON My Commission expires: 09/02/2020
Doc Date: 12 10 Notary Name: EMILY MORTON Doc Description: Annual Report: 1	No. Pages: 2 Obyest Annual Circuit

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18 JAN 11 P1:10

ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
KAI, GARY K.		808-532-2244
MAILING ADDRESS (Street)		FAX
1003 BISHOP STREET, SUITE 2630		EMAIL HIBR@AOL.COM
(City) HONOLULU	(State) HI	(Zip Code) 96813
LOBBYIST FIRM/EMPLOYER (Fill in only if you	u are employed by a business entity that has been retained to lobby)	TELEPHONE
HAWAII BUSINESS ROUNDTABLE		808-532-2244
MAILING ADDRESS (No. and Street or F	P.O Box)	FAX
1003 BISHOP STREET, SUITE 2630		
		EMAIL HIBR@AOL.COM
(City) HONOLULU	(State) HI	(Zip Code) 96813

PART II ORGANIZAT	ION	
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
HAWAII BUSINESS ROUNDTAE	BLE /	808-532-2244
MAILING ADDRESS (No. and	MAILING ADDRESS (No. and Street or P.O Box)	
1003 BISHOP STREET, SUITE	2630	EMAIL HIBR@AOL.COM
(City) HONOLULU	(State) HI	(Zip Code) 96813

PART III EXPENDITURES, BY TYPE				
Political Contributions	Amount \$0	Receptions, Meals, Food & Beverages	Amount \$0	
Preparation & Distribution of Lobbying Materials	Amount \$0	Media Advertising	Amount \$0	
Entertainment & Events	Amount \$0	Other		
		TOTAL \$0		

Fees		Amount \$0		
Compensation		Amount \$0	Amount \$0	
Contributions Membership Fees Check here if additional sheets are attached		Amount \$0		
		Amount \$0		
		□ n/a		
PART V DESCRIPTION	ON OF SUBJECTS	ON WHICH	YOU LOBBIED	
☑Business & Economic Development	□Community Serv	ices	□Customer Services	
□Culture & Arts	□Housing		□Public Works, Infrastructure & Sustainability	
□Parks & Recreation	☑Public Health, Sa	afety & Welfare	□Tourism	
☑Transportation	□Zoning & Planning		□Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept	
PART VI POLICY MA		ECISIONS	YOU SOUGHT TO	
PART VI POLICY MA		DECISIONS	YOU SOUGHT TO	
PART VI POLICY MA NFLUENCE AND OU			YOU SOUGHT TO	
PART VI POLICY MAINFLUENCE AND OU		5.	YOU SOUGHT TO e if additional sheets are attached	
PART VI POLICY MAINFLUENCE AND OL	JTCOME	5.		
PART VI POLICY MAINFLUENCE AND OUT. 2. 3. PART VII LOBBYIST I hereby certify that the forego	CERTIFICATION	4. 5. Check her	e if additional sheets are attached	
PART VI POLICY MAINFLUENCE AND OUT. 1. 2. 3. PART VII LOBBYIST I hereby certify that the foregode and correct. LOBBYIST SIGNATURE	CERTIFICATION Ding statements are true	Subscribed ar This 9+10 da By: Diane	e if additional sheets are attached and sworn to before me	
PART VI POLICY MAINFLUENCE AND OL 1. 2. 3. PART VII LOBBYIST I hereby certify that the foregonand correct. LOBBYIST SIGNATURE DATE	CERTIFICATION Ding statements are true	Subscribed ar This 9+10 da By: Diane	e if additional sheets are attached and sworn to before me ay of January, 2018	



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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

	TELEPHONE
	(808) 548-4811
	FAX (808) 548-2975
680 IWILEI ROAD, SUITE 510	
(State)	(Zip Code)
HAWAII	96817
I in only if you are employed by a business entity that has been retained to lobby)	TELEPHONE
	(808) 548-4188
reet or P.O Box)	FAX (808) 548-2975
	EMAIL bkaku@castlecooke.com
(State)	(Zip Code)
	(State) HAWAII I in only if you are employed by a business entity that has been retained to lobby) Treet or P.O Box) (State) HAWAII

PART II ORGANIZATION				
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE		
CASTLE & COOKE HOMES HA	AWAII, INC.	(808) 548-4811		
MAILING ADDRESS (No. and Street or P.O Box) 680 IWILEI ROAD, SUITE 510		FAX (808) 548-2975		
	EMAIL			
(City) HONOLULU (State) HAWAII		(Zip Code)		
HONOLULU	HAVVAII	96817		

PART III EXPENDIT	TURES, BY TYPE		
Political Contributions	Amount 0.00	Receptions, Meals, Food & Beverages	Amount 0.00
Preparation & Distribution of Lobbying Materials	Amount 0.00	Media Advertising	Amount 0.00
Entertainment & Events	Amount 0.00	Other 0.00	
		TOTAL 0.00	

PART IV FEES, COMPEN YOU RECEIVED FOR TH			NS AND MEMBERSHIP FEES
Fees		Amount	
Compensation 25		Amount	
Contributions		Amount	
Membership Fees		Amount	
☐ Check here if additional sheets	are attached	⊠ n/a	
PART V DESCRIPTION C	F SUBJECTS	ON WHICH	YOU LOBBIED
□Business & Economic Development	□Community Servi	ces	□Customer Services
□Culture & Arts	⊠Housing		☑ Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism
□Transportation ☑Zoning & Plannin		g	□ Specific Legislation: Bill No. (Year) Reso No. (Year) Admin. Rule No. Dept.
□Other (indicate below):			VOLLOCALIZATO
PART VI POLICY MAKING INFLUENCE AND OUTCO		ECISIONS	YOU SOUGHT TO
1. _{N/A} 4.		4.	
2.		5.	
3.		☐ Check here if additional sheets are attached	
PART VII LOBBYIST CEF	RTIFICATION		
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE JAN - 5 2018 DATE NOTARY CERTIFICATION Kyoko Patoc Doc. Description: Doc. Daton Loc. Daton Rev. 12/2017 Rev. 12/2017 A page Signature Loc. Deadline: Januar		This day By: WYOKO PA NOTARY OR ANY My commission June 14, 202	O No. 96-313



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

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18 JAN -9 P3:01

ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
KAKU, BEVERLY J.		(808) 548-4811
MAILING ADDRESS (Street)		FAX (808) 548-2975
680 IWILEI ROAD, SUITE 510		EMAIL
(City) HONOLULU	(State) HAWAII	(Zip Code) 96817
LOBBYIST FIRM/EMPLOYER (Fill in only if	you are employed by a business entity that has been retained to lobby)	TELEPHONE
CASTLE & COOKE, INC.		(808) 548-4188
MAILING ADDRESS (No. and Street or P.O Box)		FAX (808) 548-2975
680 IWILEI ROAD, SUITE 510		EMAIL bkaku@castlecooke.com
(City) HONOLULU	(State)	(Zip Code) 96817

PART II ORGANIZAT	ION	
NAME OF ORGANIZATION Y	OU LOBBY FOR (Do not abbreviate)	TELEPHONE
CASTLE & COOKE PROPERT	IES, INC.	(808) 548-4811
MAILING ADDRESS (No. and Street or P.O Box)		FAX (808) 548-2975
680 IWILEI ROAD, SUITE 510		EMAIL
(City) HONOLULU (State) HAWAII		(Zip Code) 96817

PART III EXPENDIT	TURES, BY TYPE		
Political Contributions	Amount 0.00	Receptions, Meals, Food & Beverages	Amount 0.00
Preparation & Distribution of Lobbying Materials	Amount 0.00	Media Advertising	Amount 0.00
Entertainment & Events	Amount 0.00	Other _{0.00}	
		TOTAL 0.00	

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PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING			
Fees		Amount	NG
Compensation		Amount	
Contributions		Amount	
Membership Fees		Amount	
☐ Check here if additional sh	neets are attached	☑ n/a	
PART V DESCRIPTIO	N OF SUBJECTS	ON WHICH	YOU LOBBIED
□Business & Economic	□Community Servi		□Customer Services
Development Culture & Arts	⊠Housing		☑ Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Sa	ifety & Welfare	□Tourism
□Transportation ☑Zoning & Planning		g	Bill No(Year) Reso No(Year) Admin. Rule No Dept
□Other (indicate below):			
PART VI POLICY MAN		ECISIONS	YOU SOUGHT TO
1. _{N/A}	100mL	4.	
2.		5.	
3.		☐ Check here if additional sheets are attached	
PART VII LOBBYIST (CERTIFICATION		
I hereby certify that the foregoing statements are true and correct. Subscribed and sworn this day of Ja By:		on expires: No. 96-313	
Doc. Description: White Boc. Date: HERV. 12/2017 Notary Signature	Pages: Deadline: Januar Date NOTE: This is a	ry 10 th of Each \ a public docume	



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18 JAN -9 P3:02

ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
KAKU, BEVERLY J.		(808) 548-4811
MAILING ADDRESS (Street)		FAX (808) 548-2975
680 IWILEI ROAD, SUITE 510		
		EMAIL
(City) HONOLULU (State) HAWAII		(Zip Code) 96817
LOBBYIST FIRM/EMPLOYER (Fill in only If you	u are employed by a business entity that has been retained to lobby)	TELEPHONE
CASTLE & COOKE, INC.		(808) 548-4188
MAILING ADDRESS (No. and Street or I	P.O Box)	FAX (808) 548-2975
680 IWILEI ROAD, SUITE 510		, ,
		EMAIL
		bkaku@castlecooke.com
(City) HONOLULU (State) HAWAII		(Zip Code)
HONOLULU	ПАVVAII	96817

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE	
CASTLE & COOKE, INC.		(808) 548-4811	
MAILING ADDRESS (No. and Street or P.O Box)		FAX (808) 548-2975	
680 IWILEI ROAD, SUITE 510	680 IWILEI ROAD, SUITE 510		
		EMAIL	
(City) HONOLULU (State) HAWAII		(Zip Code) 96817	

PART III EXPENDIT	TURES, BY TYPE		
Political Contributions	Amount 0.00	Receptions, Meals, Food & Beverages	Amount 0.00
Preparation & Distribution of Lobbying Materials	Amount 0.00	Media Advertising	Amount 0.00
Entertainment & Events	Amount 0.00	Other 0.00	
		TOTAL 0.00	

Deadline: January 10th of Each Year NOTE: This is a public document

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING				
Fees		Amount		
Compensation		Amount		
Contributions		Amount		
Membership Fees		Amount		
☐ Check here if additional sheets	are attached	⊠ n/a		
PART V DESCRIPTION O	F SUBJECTS	ON WHICH	YOU LOBBIED	
☐Business & Economic Development	□Community Servi	ces	☐ Customer Services	
□Culture & Arts	⊠Housing		☑ Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism	
	8		□Specific Legislation:	
□Transportation	⊠Zoning & Planning		Bill No(Year) Reso No(Year) Admin. Rule No Dept	
□Other (indicate below):				
PART VI POLICY MAKING		ECISIONS	YOU SOUGHT TO	
1. _{N/A}		4.		
2.		5.		
3.		☐ Check here if additional sheets are attached		
PART VII LOBBYIST CER	RTIFICATION			
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE JAN - 5 2018 DATE NOTARY CERTIFICATION: No. 96-313		This 5 da		

Rev. 12/2017 #Pages: Deadline: January 10th of Each Year Notary Signature

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
KELLY STEPHEN 'H.		(808) 674-3289
MAILING ADDRESS (Street)		FAX
1001 Kamokila Boulevard, Suite 250)	
		EMAIL stevek@kapolei.com
(City) Kapolei	(State) Hawaii	(Zip Code)
·		96707
LOBBYIST FIRM/EMPLOYER (FIII In	n only if you are employed by a business entity that has been retained to lobby)	TELEPHONE
AINA NUI CORPORATION/JAMES CAMPBELL CORPORATION		(808 674-6674
MAILING ADDRESS (No. and Stre	eet or P.O Box)	FAX
1001 Kamokila Boulevard, Suite 250)	
		EMAIL
		stevek@kapolei.com
(City) Kapolei	(State) Hawaii	(Zip Code)
Kapolei	llawan	96707
<u>PART II ORGANIZATION</u>	N	
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
JAMES CAMPBELL CORPORATION /		(808) 674-6674
MAILING ADDRESS (No. and Stre	eet or P.O Box)	FAX

PART II ORGANIZA	ATION	
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
JAMES CAMPBELL CORPORATION /		(808) 674-6674
MAILING ADDRESS (No. and Street or P.O Box)		FAX
1001 Kamokila Boulevard, Suite 250		EMAIL
(City) Kapolei (State) Hawaii		(Zip Code) 96707

PART III EXPENDI	TURES, BY TYPE		
Political Contributions	Amount \$4,450.00	Receptions, Meals, Food & Beverages	Amount \$0.00
Preparation & Distribution of Lobbying Materials	Amount \$0.00	Media Advertising	Amount \$0.00
Entertainment & Events	Amount \$0.00	Other	
		TOTAL \$4,450.00	

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PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING				
Fees		Amount \$0.00		
Compensation	,	Amount \$0.00		
Contributions		Amount \$0.00		
Membership Fees		Amount \$0.00		
☐ Check here if additional sheets	are attached	□ n/a		
PART V DESCRIPTION C	F SUBJECTS (ON WHICH	YOU LOBBIED	
☑Business & Economic Development	□Community Service		☐Customer Services	
Culture & Arts	⊠Housing		□Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Sat	fety & Welfare	□Tourism	
⊠Transportation	⊠Zoning & Planning		⊠Specific Legislation: Bill No. 58 & 59 (Year) 2017 Reso No. (Year) Admin. Rule No. (Year) Dept.	
□Other (indicate below):				
PART VI POLICY MAKING		ECISIONS	YOU SOUGHT TO	
1. Ewa Highway Impact Fee Policy		4.		
2.	,	5.		
3.		☐ Check here if additional sheets are attached		
PART VII LOBBYIST CER	RTIFICATION			
I hereby certify that the foregoing statements are true and correct.		Subscribed and sworn to before me This day of		
LOBBYIST SIGNATURE 1/8/18 DATE		By: NOTARY OR ANY OR My commission	OFFICIAL AUTHORIZED TO ADMINISTER OATHS	

STATE OF HAWAII)) SS.	
CITY AND COUNTY OF HONOLULU)	
On this 8th day of Jappeared Stephen H. Kelly, duly sworn or affirmed, did say that such the free act and deed of such person, and if duly authorized to execute such instrument	to me personally known, we person executed the foregot applicable in the capacity shapes and the capacity shapes are the capac	who, being by me bing instrument as
No. 98-33	Name: Jenny R. Okano Notary Public, State of Hav My commission expires: 1	
Document Date:1/10/2018 Jenny R. Okano Document Description: _Honolulu Ethics Report (Lobbyist Annual Report)	No. of Pages:3 First Circuit Commission - Annual	No. 98-33
Anny K Okuns Notary Signature	1/8/2018 Date	No. 98-33

NOTARY CERTIFICATION

CITY AND COUNTY OF HONOLULU ETHICS COMMISSION LOBBYIST ANNUAL REPORT FORM

 Name	Kido	C. /	Mi	ke
(Print)	Last	First	Mic	Idle
Business Address		#1400, Honolulu, HI 968 ty, State, Zip Code)	13 Phone	808-539-0428
Email Address: _	cmk@awlaw.com			
State name and ac	ldress of organization	you lobbied for.		
	Vacation Ownership Harbor Drive _ 32821			
State total amount receipts related to	t received as a lobbyis lobbying activities.	st representing contributi	ons, membership	o fees and other
\$0				ಪ
Φ0				JAN
State total amount	t expended for lobbying	ng by lobbyist.		10
\$0				P7:02
List results of the	legislation you sough	t to influence. Doc. Date: DEC	2 1 2017 #	Pages: /
N/A	Shilling Stranger	Doc Description:	R. Souza City and Count	First Circuit
Other information		92-187 JUL DANK	SHA DEC	2 1 2017
None	47	FOF HOLLING NOT	ARY CERTIFICAT	Date ION
	at the foregoing states	nents Subscribed an	d sworn to befor	e me
are true and correc	ગ.	STAR TO	day of Proces	20'/.
C w.	a 15.0	D Molary or and	•	to administer oaths
(Sign	nature)	Mycommission	expires: Mana	ch 24, 2020

DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

(See back of this form for information.)

PLEASE RETAIN A COPY FOR YOR RECORDS



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768

Email: ethics@honolulu.gov

Website: http://www.honolulu.gov/ethics/

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18 JAN -9 P2:57

ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Kimura, Joy Y.N.		(808) 845-3238
MAILING ADDRESS (Street) 650 Iwilei Road, Suite 285		FAX (808) 845-8300
		EMAIL info@hawaiilecet.org
(City) Honolulu (State) Hawaii		(Zip Code) 96817
LOBBYIST FIRM/EMPLOYER (Fill in only if yo	u are employed by a business entity that has been retained to lobby)	TELEPHONE
MAILING ADDRESS (No. and Street or P.O Box)		FAX
		EMAIL
(City)	(State)	(Zip Code)

PART II ORGANIZATION			
NAME OF ORGANIZATION	TELEPHONE		
Hawaii Laborers-Employers Cooperation and Education Trust (LECET)		(808) 845-3238	
MAILING ADDRESS (No. and Street or P.O Box) 650 Iwilei Road, Suite 285		FAX (808) 845-8300	
		EMAIL info@hawaiilecet.org	
(City) Honolulu (State) Hawaii		(Zip Code) 96817	

PART III EXPENDIT	TURES, BY TYPE		
Political Contributions	Amount 0.00	Receptions, Meals, Food & Beverages	Amount 0.00
Preparation & Distribution of Lobbying Materials	Amount 0.00	Media Advertising	Amount 0.00
Entertainment & Events	Amount 0.00	Other	
		TOTAL 0.00	

Rev. 12/2017 Deadline: January 10th of Each Year

PART IV FEES, COMPE YOU RECEIVED FOR TH	NSATION, CON IE PURPOSE (ITRIBUTION OF LOBBYN	NS AND MEMBERSHIP FEES
Fees		Amount 0.00	
Compensation		Amount 0.00	
Contributions		Amount 0.00	
Membership Fees		Amount 0.00	
☐ Check here if additional sheet	s are attached	⊠ n/a	
PART V DESCRIPTION (OF SUBJECTS	ON WHICH	YOU LOBBIED
☑Business & Economic Development	□Community Serv		☐Customer Services
□Culture & Arts	☑Housing		☑Public Works, Infrastructure & Sustainability
□Parks & Recreation	☑Public Health, Sa	ifety & Welfare	□Tourism
			☐Specific Legislation:
▼ Transportation	▼Transportation ▼Zoning & Planning		Bill No(Year) Reso No(Year) Admin. Rule No Dept
□Other (indicate below):			
PART VI POLICY MAKIN	G PROCESS D	ECISIONS	YOU SOUGHT TO
INFLUENCE AND OUTCO	OME		
1. NONE les orfor/18		4.	
2.		5.	
3.		☐ Check here if additional sheets are attached	
PART VII LOBBYIST CER	RTIFICATION		
I hereby certify that the foregoing stand correct.	atements are true	Subscribed and sworn to before me	
		This 9th day of January, 2018	
LOBBYIST SIGNATURE		NOTARY OR ANY OFFICIAL AUTHORIZED TO WOMING THE OFFICIAL	
January 9, 2018 DATE		My commission expires: No. 96-169	

Deadline: January 10th of Each Year

Notary Name: Cynthia R. Komori First C:

Doc. Description Hamilian Ethica Commun.

Annual Report fur Joy J.N. Kimura

i 1918

Notary Signature Date



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

18 JAN 10 P1:08

PART I LOBBYIST		
NAME (Last) (First) (Middle)	TELEPHONE	
		841-5877
KOBAYASH RYAN K MAILING ADDRESS (Street)		FAX
1, 17 7)		EMAIL
1617 Palama St		rkobaupshi@load368.org
(City) Honolulu (State)		(Zip Code) 96817
LOBBYIST FIRM/EMPLOYER (Fill in only if you are employed by a busine	ss entity that has been retained to lobby)	TELEPHONE
Hawaii Laborers' Union Local 368		841-5877
MAILING ADDRESS (No. and Street or P.O Box)	1	FAX
1, 17 7, 61		EMAIL
161+ Palama St		rkobaupshile Joca 1368. org
(City), Honolulu (State)		(Zip Code)
Honomin		9001T
PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not a	hbrovisto)	TELEPHONE
N 9 50		
Hawaii Laborers' Union Local 3 MAILING ADDRESS (No. and Street or P.O Box)	00/	841-5877
MAILING ADDRESS (No. and Street or P.O Box)	Carrylay I	FAX
		EMAIL
11017 Palama St.		Irkobayashi@local368.09
(City) (State)	,.	(Zip Code)
(City) Honolulu (State) Hawx	all	916817
PART III EXPENDITURES, BY TYPE		
Political Contributions Amount Receptions, Meals, Food & Beverages		Amount ϕ
Preparation & Distribution of Lobbying Materials Amount Media Advertising		Amount
Entertainment & Events Amount Other		ind. Baco.
Entra P	aben First Circuit JATOT	Notary Name: Narsi Ad Gan
	Duc. Description Saludet	

Deadline: January 10th of Each Year NOTE: This is a public document

Notiny Signature

PART IV FEES, COMPEN YOU RECEIVED FOR TH			NS AND MEMBERSHIP FEES
Fees		Amount	Ф
Compensation		Amount	Ø
Contributions	1	Amount	Ø
Membership Fees		Amount	Ď
☐ Check here if additional sheets	are attached	□ n/a	
PART V DESCRIPTION C	F SUBJECTS	ON WHICH	YOU LOBBIED
☐Business & Economic Development	□Community Servi	ces	□Customer Services
□Culture & Arts	☑Housing		□Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism
		···	□Specific Legislation:
☐Transportation		Bill No(Year)g Reso No(Year) Admin. Rule No Dept	
□Other (indicate below):			TO DAKE THE
PART VI POLICY MAKING		ECISIONS	YOU SOUGHT TO
1. Sought to obtain approve	al for projecto	4.	* * * * * * * * * * * * * * * * * * *
2.	voiding	5.	
Saight to obtain zoning approval for projects		☐ Check here if additional sheets are attached	
PART VII LOBBYIST CEF	RTIFICATION	rous -	
I hereby certify that the foregoing sta and correct.	atements are true	= [,]	od sworn to before me
LOBBYIST SIGNATURE # Pages		By: William	DEFICIAL AUTHORIZED TO ADMINISTER OATHS n expires:
No. 97-171 Deadline: January 10 th of Each Year Notary Signature Date No. 97-171 No. 97-171 No. 97-171 Deadline: January 10 th of Each Year Date			



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR BANGEWISE ONLY ETHICS COMMISSION RECEIVED

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)	414	TELEPHONE
KODAMA, LAURA M.		(808) 548-4811
MAILING ADDRESS (Street)		FAX (808) 548-2975
680 IWILEI ROAD, SUITE 510		EMAIL
(City) HONOLULU	(City) HONOLULU (State) HAWAII	
LOBBYIST FIRM/EMPLOYER (Fill in only if you	u are employed by a business entity that has been retained to lobby)	TELEPHONE
CASTLE & COOKE HOMES HAWAII, INC		(808) 548-4188
MAILING ADDRESS (No. and Street or 680 IWILEI ROAD, SUITE 510	MAILING ADDRESS (No. and Street or P.O Box)	
		EMAIL Ikodama@castlecooke.com
(City) HONOLULU (State) HAWAII		(Zip Code) 96817

PART II ORGANIZAT	TION	
NAME OF ORGANIZATION CASTLE & COOKE HOMES H	YOU LOBBY FOR (Do not abbreviate) AWAII, INC. /	TELEPHONE (808) 548-4811
MAILING ADDRESS (No. and Street or P.O Box) 680 IWILEI ROAD, SUITE 510		FAX (808) 548-2975 EMAIL
(City) HONOLULU	(State)	(Zip Code) 96817

PART III EXPENDITURES, BY TYPE			
Political Contributions	Amount 0.00	Receptions, Meals, Food & Beverages	Amount 0.00
Preparation & Distribution of Lobbying Materials	Amount 0.00	Media Advertising	Amount 0.00
Entertainment & Events	Amount 0.00	Other 0.00	
		TOTAL 0.00	

Fees		Amount Amount		
Compensation		Amount		
Contributions		Amount		
Membership Fees		Amount		
☐ Check here if additional s	heets are attached	⊠ n/a		
PART V DESCRIPTIO	N OF SUBJECTS	ON WHICH	YOU LOBBIED	
□Business & Economic Development	□Community Serv		☐ Customer Services	
□Culture & Arts	⊠Housing		☑Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Sa	afety & Welfare	□Tourism	
□Transportation ☑Zoning & Plannin		ng	□Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept	
□Other (indicate below):				
PART VI POLICY MAI		DECISIONS	YOU SOUGHT TO	
1. N/A		4.		
2.		5.		
3.		☐ Check here if additional sheets are attached		
PART VII LOBBYIST	CERTIFICATION			
I hereby certify that the foregoinand correct. LOBBYIST SIGNATURE JAN - 5 2018 DATE NOTARY CERTIFICATION	Junio PA OCHIMI	This 5 da	The state of the s	
	Charles of	1 *		



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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ANNUAL REPORT

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Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle) LA CHICA, MAE PA	MUCIA QUEMA	TELEPHONE
MAILING ADDRESS (Street)	FAX	
800 LICHARDS ST. SMITE WI		EMAIL trish@hiphi.org
(City) HONOLULU	(State) H1	(Zip Code) 96813
LOBBYIST FIRM/EMPLOYER (Fill in only if)	rou are employed by a business entity that has been retained to lobby)	TELEPHONE
MAILING ADDRESS (No. and Street or	P.O Box)	FAX
		EMAIL
(City)	(State)	(Zip Code)
DART II ORCANIZATION		
PART II ORGANIZATION NAME OF ORGANIZATION YOU LOBE Hawaii Public Health Inct	BY FOR (Do not abbreviate)	TELEPHONE 591508
MAILING ADDRESS (No. and Street or	FAX	
850 Michards St. Snite 201		EMAIL
(City) Honoluly	(State) M	(Zip Code) 96769813

PART III EXPENDITURES, BY TYPE				
Political Contributions	Amount	Receptions, Meals, Food & Beverages	Amount	
Preparation & Distribution of Lobbying Materials	Amount \$60.10	Media Advertising	Amount	
Entertainment & Events	Amount	Other		
187 SURUR VO	LIST I (Ok. 1994) Charles	TOTAL \$60.10		

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Rev. 12/2017

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING				
Fees		Amount		
Compensation		Amount		
Contributions		Amount		
Membership Fees		Amount		
☐ Check here if additional sheets	s are attached	<i>JP 02/13/1</i> ⊠n/a	3	
PART V DESCRIPTION C	F SUBJECTS	ON WHICH	YOU LOBBIED	
☐Business & Economic Development	□Community Servi	ces	□Customer Services	
□Culture & Arts	□Housing		□Public Works, Infrastructure & Sustainability	
□Parks & Recreation	☑ Public Health, Sa	fety & Welfare	□Tourism	
☐Transportation ☐Zoning & Plannin		g	□Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept	
Other (indicate below): Health				
PART VI POLICY MAKIN		ECISIONS	YOU SOUGHT TO	
1. Bill 70 passed		4.		
2.		5.		
3.		☐ Check here if additional sheets are attached		
PART VII LOBBYIST CEF	RTIFICATION		"	
I hereby certify that the foregoing stand correct. LOBBYIST SIGNATURE \ \ \ \ \ \ \ \ \ \ \ \ \ \	Clifton S. Kaneshiro DEFFICIAL AUTHORIZED TO ADMINISTER ATHS on expires: NOTARY PUBLIC			
Rev. 12/2017	ev. 12/2017 See attached Notary Certificate Deadline: January 10 th of Each Year NOTE: This is a public document			



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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

18 JAN -9 P2:57

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Lee, Potar it.M.	(608) 845-3238	
MAILING ADDRESS (Street) 650 Junior Kough Sunk 285	FAX (808) 845-8300	
650 JWHA KUUL SMIC 200		EMAIL.
		into Chavarilecut, and
(City)	(Zip Code)	
itonolulu	96817	
LOBBYIST FIRM/EMPLOYER (Fill in only if you	TELEPHONE	
MAILING ADDRESS (No. and Street or F	FAX	
		EMAIL
(City)	(State)	(Zip Code)

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBE	BY FOR (Do not abbreviate)	TELEPHONE
Hawaii Labovars - Employers	(808) 845-3238	
Hawaii Labovas Employers Cooperation and Education Twst MAILING ADDRESS (No. and Street or P.O Box)		FAX (808) 845-3238
650 Iwilei Road, Suite 285	18.50	(000) 013 3230
		EMAIL info Chawaii locations
(City) (State)		(Zip Code)
Itonolaly Hawaii		40817

Political Contributions	Amount	h?	Receptions, Meals, Food & Beverages	Amount
Preparation & Distribution of Lobbying Materials	Amount	h hayd	Media Advertising	Amount.
Entertainment & Events	Amount		Other N/A	
TESPLE D	- <u>f., d. </u>	Barrier .	TOTAL 6	

Deadline: January 10th of Each Year NOTE: This is a public document

PART IV FEES, COMPEN YOU RECEIVED FOR TH			IS AND MEMBERSHIP FEES		
Fees		Amount	ø		
Compensation		Amount 2	Amount 💋		
Contributions		Amount 9	1		
Membership Fees		Amount 🎉			
☐ Check here if additional sheets	are attached	□ n/a			
PART V DESCRIPTION O	F SUBJECTS	ON WHICH	YOU LOBBIED		
☑Business & Economic	□Community Service		□Customer Services		
Development ☐Culture & Arts	□Housing		☑∕Fublic Works, Infrastructure & Sustainability		
□Parks & Recreation	□Public Health, Sat	fety & Welfare	□Tourism		
		- 101	☐Specific Legislation:		
Transportation Zoning & Plannin		Bill No(Year) Reso No(Year) Admin. Rule No Dept			
MOther (indicate below): Construction Industry P	elated				
PART VI POLICY MAKININFLUENCE AND OUTCO		ECISIONS	YOU SOUGHT TO		
1. N/A	r and in	4. N/A	I was a Second about		
2. NA		5. N/A			
3. N/A	1)	☐ Check here if additional sheets are attached			
PART VII LOBBYIST CER	RTIFICATION		LOTAD P		
I hereby certify that the foregoing st		Subscribed and sworn to before me			
and correct.		This 2nd day of Junuary, 20180FHAMILITY			
LOBBYIST SIGNATURE		By: NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS			
DATE 2 8	3	My commission expires: 1/2/16 #Pages: 2 Notary Name: Joy Y.N. Kimura 15t Circu			
	- 100 massage (100		Doc. Description: City and County of Honelule		

Deadline: January 10th of Each Year

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Date

CITY AND COUNTY OF HONOLULU ETHICS COMMISSION HONOLULU LOBBYIST ANNUAL REPORT FORWES COMMISSION RECEIVED

Name Lincoln	Faye 18 FEB -5 All :53
(Print) Last	First
Business Address 206 North 2100 V (Street, City, State, Zip	Vest, Saltlakerfione (801) 325-015
State manner and address of enganization year lab	ind for
state name and address of organization you look	iled for.
Avalon Health Care	
State total amount received as a lobbyist represe receipts related to lobbying activities.	nting contributions, membership fees and other
None -	
State total amount expended for lobbying by lob	byist.
none	
List results of the legislation you sought to influe	ence.
NIA	
Other information.	
I hereby certify that the foregoing statements	Subscribed and sworn to before me
are true and correct.	This 30th day of Junary, 20/8.
h 1 -1	Notary or any official authorized to administer oaths
Mud Lamubi	
(Signature)	My commission expires: /// D4 / 20/8
(5.5	

DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

(See back of this form for information.)



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TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR 125 COMPRESSION RECEIVED

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
LOVVORN, CHRISTOPHER M.		(808) 548-4811
MAILING ADDRESS (Street)		FAX (808) 548-2975
680 IWILEI ROAD, SUITE 510		EMAIL EMAIL
(City) HONOLULU	(State) HAWAII	(Zip Code) 96817
LOBBYIST FIRM/EMPLOYER (Fill in only if yo	u are employed by a business entity that has been retained to lobby)	TELEPHONE
CASTLE & COOKE HAWAII		(808) 548-4188
MAILING ADDRESS (No. and Street or 680 IWILEI ROAD, SUITE 510	P.O Box)	FAX (808) 548-2975
OUT WILL NOAD, SUITE STO	EMAIL clovvorn@castlecooke.com	
(City) HONOLULU	(State) HAWAII	(Zip Code) 96817

PART II ORGANIZAT	ION	
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
CASTLE & COOKE PROPERTIES, INC./		(808) 548-4811
MAILING ADDRESS (No. and Street or P.O Box) 680 IWILEI ROAD, SUITE 510		FAX (808) 548-2975
		EMAIL
(City)	(State)	(Zip Code)
HONOLULU	HAWAII	96817

PART III EXPENDITURES, BY TYPE				
Political Contributions	Amount 0.00	Receptions, Meals, Food & Beverages	Amount 0.00	
Preparation & Distribution of Lobbying Materials	Amount 0.00	Media Advertising	Amount 0.00	
Entertainment & Events	Amount 0.00	Other _{0.00}		
		TOTAL 0.00		

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING				
Fees		Amount		
Compensation		Amount		
Contributions		Amount		
Membership Fees		Amount		
☐ Check here if additional shee	ets are attached	⊠ n/a		
PART V DESCRIPTION	OF SUBJECTS	ON WHICH	I YOU LOBBIED	
⊠Business & Economic Development	□Community Servi		□Customer Services	
□Culture & Arts	⊠Housing		□ Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Sa	afety & Welfare	□Tourism	
□Transportation □Zoning & Planning		g	□ Specific Legislation: Bill No. (Year) Reso No. (Year) Admin. Rule No. Dept.	
□Other (indicate below):				
PART VI POLICY MAKI		ECISIONS	YOU SOUGHT TO	
1. NONE & OV/call		4.	4.	
2.		5.		
3.		☐ Check here if additional sheets are attached		
PART VII LOBBYIST CERTIFICATION				
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE JAN 5 2018 DATE NOTARY CERTIFICATION Kyoko Paloc Eirst Judicial Circuit		Subscribed and sworn to before me This day of January , 2018 By: KYOKO PATOC, State of Hawaii NOTARY OF ANY OFFICIAL AUTHORIZED TO ADMINISTER CATHS My commission expires: June 14, 2020 No. 96-313		
Doc. Description: 1774 Page Doc. Date: 1774 Page Rev. 12/20 Notally Signature Details	Deadline: Januar NOTE: This is a	ry 10 th of Each Y a public docume	ear	



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(Zip Code) 22102

ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

	(Type or Print Clearly)	
PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
LUI-KWAN, IVAN M.		(808) 537-6100
MAILING ADDRESS (Street)		FAX (808) 537-5434
733 BISHOP STREET, SUITE 1900		
		EMAIL
		iluikwan@starnlaw.com
(City) HONOLULU	(State) HAWAII	(Zip Code)
HONOLOLU	IIAVAII	96813
LOBBYIST FIRM/EMPLOYER (Fill in only if you	are employed by a business entity that has been retained to lobby)	TELEPHONE
STARN O'TOOLE MARCUS & FISHER	(808) 537-6100	
MAILING ADDRESS (No. and Street or	FAX (808) 537-5434	
733 BISHOP STREET, SUITE 1900		
		EMAIL
(City) HONOLULU	(State)	(Zip Code)
HONOLULU	HAWAII	96813
PART II ORGANIZATION		and the second second
NAME OF ORGANIZATION YOU LOBB	Y FOR (Do not abbreviate)	TELEPHONE
PARK HOTELS & RESORTS INC!		(703) 584-7979
MAILING ADDRESS (No. and Street or	FAX	
1600 TYSONS BOULEVARD, 10TH FLOOF	2	
		EMAIL

PART III EXPENDIT	TURES, BY TY	PE	
Political Contributions	Amount	Receptions, Meals, Food & Beverages	Amount
Preparation & Distribution of Lobbying Materials	Amount	Media Advertising	Amount
Entertainment & Events	Amount	Other	
		TOTAL 0	

(State) VIRGINIA

Deadline: January 10th of Each Year NOTE: This is a public document

(City) MCLEAN

PART IV FEES, COMPEN YOU RECEIVED FOR TH			NS AND MEMBERSHIP FEES	
Fees		Amount \$ 14,294.24		
Compensation		Amount		
Contributions		Amount		
Membership Fees		Amount		
☐ Check here if additional sheets	are attached	□ n/a		
PART V DESCRIPTION C	F SUBJECTS	ON WHICH	YOU LOBBIED	
☐Business & Economic Development	□Community Servi		☐Customer Services	
□Culture & Arts	□Housing		☐ Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Sa	fety & Welfare	⊠Tourism	
			⊠Specific Legislation:	
□Transportation	⊠Zoning & Planning		Bill No. (Year) Reso No. 17-303 (Year) 2017 Admin. Rule No. Dept.	
□Other (indicate below):				
PART VI POLICY MAKIN		ECISIONS	YOU SOUGHT TO	
1. INTRODUCTION & ADOPTION OF RESO NO. 17-303		4.		
2.		5.		
3.		☐ Check here if additional sheets are attached		
PART VII LOBBYIST CERTIFICATION				
I hereby certify that the foregoing statements are true and correct.		Subscribed and sworn to before me GERNAD. This 10TH day of JANUARY 2018 01AR.		
LOBBYIST SIGNATURE		By: NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS *		
JANUARY 10, 2018 DATE		My commission expires:		

NOTARY CERTIFICATION STATEMENT

Document Description: City and County of Honolulu Ethics

Commission Lobbyist Annual Report for Ivan M. Lui-Kwan

(Park Hotels & Resorts Inc.)

No. of Pages: 3

Jurisdiction: First Judicial Circuit

Honolulu, Hawaii

Signature of Notary

Date of Notarization and

Certification Statement

Bernadette A. Lee

Printed Name of Notary

(Official Stamp or Seal)



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ HONOLULU

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST			
NAME (Last) (First) (Middle)		TELEPHONE	
Lori Ann C. Lum		808-544-8300	
MAILING ADDRESS (Street)		FAX	
999 Bishop Street, Suite 1250		EMAIL lum@wik.com	-/
(City) Honolulu	(State) _{HI}	(Zip Code) 96813	
LOBBYIST FIRM/EMPLOYER (Fill	TELEPHONE		
Watanabe Ing LLP		808-544-8300	
MAILING ADDRESS (No. and Str	FAX		
999 Bishop Street, Suite 1250		EMAIL Ilum@wik.com	
(City) Honolulu	(State) HI	(Zip Code) 96813	

PART II ORGANIZA	TION	
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
The Howard Hughes Corporation		808-591-4811
MAILING ADDRESS (No. and Street or P.O Box)		FAX
1240 Ala Moana Blvd., Suite 200		
		EMAIL
		Todd.Apo@howardhughes.com
(City) Honolulu	(State)	(Zip Code)
Honolulu	MI MI	96814

PART III EXPENDIT	IUKES, BY IYPE		
Political Contributions	Amount	Receptions, Meals, Food & Beverages	Amount
Preparation & Distribution of Lobbying Materials	Amount	Media Advertising	Amount
Entertainment & Events	Amount	Other N/A \ Lo \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	6
		TOTAL	

PART IV FEES, COMPEN YOU RECEIVED FOR THI	SATION, CON E PURPOSE O	TRIBUTION F LOBBYIN	NS AND MEMBERSHIP FEES
Fees 31 31 31		Amount \$1,089.00	
Compensation		Amount	
Contributions		Amount	
Membership Fees		Amount	
☐ Check here if additional sheets are attached		□ n/a	
PART V DESCRIPTION O	F SUBJECTS	ON WHICH	YOU LOBBIED
□Business & Economic Development	□Community Servi		□Customer Services
□Culture & Arts	⊠Housing		□Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism
□Transportation	⊠Zoning & Planning		□Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept
Other (indicate below): PART VI POLICY MAKING		ECISIONS	YOU SOUGHT TO
1. Kakaako Zoning & Housing issues		4.	
2.	<u>,</u>	5.	
3.		☐ Check here if additional sheets are attached	
PART VII LOBBYIST CER	TIFICATION		
I hereby certify that the foregoing statements are true and correct. Min Inn C Hum LOBBYIST SIGNATURE I		Subscribed and sworn to before me This 12th day of Tankery, 2018 By: Allum M. Morivaki My commission expires: 6/11/20	
and correct. Ahi ann C Aum		This 12 da By: Lewis Notary or any Charlene IV	ay of <u>January</u> , <u>2018</u> Con Description of the state of

Charlene M Moriwaki Doc Description Annual # Pages ____ First Circuit Report

Obligation On. Obligation Notary Signature NOTARY CERTIFICATION Charlene M. Moriwaki



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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ETHICS COMMISSION

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST				
NAME (Last) (First) (Middle)			TELEPHONE
Luning, Debfa M A				808-599-8370
MAILING ADDRESS (Stree	et)	-		FAX 808-599-8342
733 Bishop Street, Suite 1400				606-599-6342
				EMAIL
(0)		Lieu		DebbieL@gentryhawaii.com
(City) Honolulu		(State) HI		(Zip Code)
	TD.			96813
LOBBYIST FIRM/EMPLOY	EK (Fill in only if yo	u are employed by a busine	ss entity that has been retained to lobby)	TELEPHONE
MAILING ADDRESS (No. a	nd Street or	P.O Box)		FAX
				EMAIL
(City)		[(O(-1-)		
(City)		(State)		(Zip Code)
PART II ORGANIZA	TION			
NAME OF ORGANIZATION	YOU LOBB	Y FOR (Do not a	bbreviate)	TELEPHONE
Gentry Homes, Ltd.		·	•	808-599-5558
MAILING ADDRESS (No. a	nd Street or I	P.O Box)		FAX
733 Bishop Street, Suite 1400				808-599-8342
Too Blottop Guidel, Guille 1466				EMAIL
				DebbieL@gentryhawaii.com
(City) Honolulu		(State)		(Zip Code)
Hollolutu		П		96813
PART III EXPENDIT	URES, B	Y TYPE		
Political Contributions			Receptions, Meals, Food	
B	\$0		& Beverages	\$0
Preparation & Distribution	Amount Media Advertising		Media Advertising	Amount

Deadline: January 10th of Each Year NOTE: This is a public document

Other \$0

TOTAL \$0

of Lobbying Materials

Entertainment & Events

\$0

Amount \$0

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING					
Fees		Amount \$0			
Compensation		Amount \$0			
Contributions		Amount \$0			
Membership Fees		Amount \$0			
☐ Check here if additional sheets	s are attached	⊠ n/a			
PART V DESCRIPTION C	F SUBJECTS	ON WHICH	YOU LOBBIED		
□Business & Economic Development	□Community Servi		□Customer Services		
□Culture & Arts	□Housing		□Public Works, Infrastructure & Sustainability		
□Parks & Recreation	□Public Health, Sat	fety & Welfare	□Tourism		
		3	□Specific Legislation:		
□Transportation □Zoning & Planning		9	Bill No(Year) Reso No(Year) Admin. Rule No Dept		
MOther (indicate below): NONE & a/w/18; phone					
PART VI POLICY MAKING INFLUENCE AND OUTCO		ECISIONS	YOU SOUGHT TO		
1. NONE les o/10/18; Phone		4.			
2.		5.			
3.		☐ Check here if additional sheets are attached			
PART VII LOBBYIST CERTIFICATION					
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE 1/3/18 DATE		Subscribed and sworn to before me This 3rd day of Jamany WIS. By: Wall Day Of MANY OFFICIAL AUTHORIZED TO ABBINISTER OATHS My commission expires:			
Deadline: January 10 th of Each Year NOTE: This is a public document					

Rev. 12/2017

Doc Date: 1.3.18 # Pages; Y
Name: SYLVIA T. HAYASHI
Doc. Description: Annual Report
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NOTARY CERTIFICATION
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ETHICS COMMISSION
TEL: (808) 768-9242 FAX: (808) 768-7768 RECE | VED

Email: ethics@honolulu.gov
Website: http://www.honolulu.gov/ethics/

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Luning, Debra M A		808-599-8370
MAILING ADDRESS (Street)		FAX 808-599-8342
733 Bishop Street, Suite 1400		000-099-0042
		EMAIL
		DebbieL@gentryhawaii.com
(City) Honolulu	(State)	(Zip Code)
<u> </u>		96813
LOBBYIST FIRM/EMPLOYER (Fill in only if you	u are employed by a business entity that has been retained to lobby)	TELEPHONE
MAILING ADDRESS (No. and Street or I	P.O Box)	FAX
10		EMAIL
(City)	(State)	(Zip Code)

PART II ORGANIZA	TION	
NAME OF ORGANIZATION	YOU LOBBY FOR (Do not abbreviate)	TELEPHONE
Gentry Investment Properties	808-599-5558	
MAILING ADDRESS (No. a	nd Street or P.O Box)	FAX 808-599-8342
733 Bishop Street, Suite 1400		606-599-6542
		EMAIL
		DebbieL@gentryhawaii.com
(City) Honolulu	(State)	(Zip Code)
Tionolaid		96813

Political Contributions	Amount \$0	Receptions, Meals, Food & Beverages	Amount \$0
Preparation & Distribution of Lobbying Materials	Amount \$0	Media Advertising	Amount \$0
Entertainment & Events Amount \$0		Other _{\$0}	
		TOTAL \$0	

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING				
Fees		Amount \$0		
Compensation		Amount \$0		
Contributions		Amount \$0		
Membership Fees		Amount \$0		
☐ Check here if additional sheet	s are attached	⊠ n/a		
PART V DESCRIPTION (OF SUBJECTS	ON WHICH	YOULOBRIED	
☐Business & Economic Development	□Community Servi		□Customer Services	
□Culture & Arts	□Housing	7. 1.	□Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism	
☐Transportation ☐Zoning & Planning		□ Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept		
Thother (indicate below): NONE 100 of coll & prove				
PART VI POLICY MAKIN		ECISIONS	YOU SOUGHT TO	
1. NONE Kis of le l'approve		4.		
2.		5.		
3.		☐ Check here if additional sheets are attached		
PART VII LOBBYIST CERTIFICATION				
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE //3/18 DATE		Subscribed and sworn to before me This 3/1 day of Jaway, 7018 By: Jaway of Jaway, 7018 NOTARY OR ANY OFFICIAL AUTHORIZED TO Apministra parts My commission expires: 87-548		
Rev. 12/2017	Deadline: January	•	***************************************	

Doc Date: 1.3.18 # Pages: Y
Name SYLVIA T. HAYASHI HVST Circuit
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925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Lyons, Timothy L.		808-537-4308
MAILING ADDRESS (Street) 1188 Bishop St., Ste. 1003-1004		FAX ₈₀₈₋₅₃₃₋₂₇₃₉
		EMAIL timllyons@cs.com
(City) _{Honolulu} (State) _{HI}		(Zip Code) 96813
LOBBYIST FIRM/EMPLOYER (Fill in only if y	ou are employed by a business entity that has been retained to lobby)	TELEPHONE
TLC-The Legislative Center		808-537-4308
MAILING ADDRESS (No. and Street or P.O Box) 1188 Bishop St., Ste. 1003-1004		FAX 808-533-2739
		EMAIL timilyons@cs.com
(City) Honolulu	(State) _{HI}	(Zip Code) 96813

PART II ORGANIZA	TION	
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
Anheuser Busch Companies	916-442-2600	
MAILING ADDRESS (No. and Street or P.O Box) 1201 K Street, Ste. 730		FAX _{314.256.6872}
E-mail: Melissa.Ameluxen@anheuser-busch.com		EMAIL Melissa.Ameluxen@anheuser-bu
(City) Sacramento	(State) _{CA}	(Zip Code) 95814

PART III EXPENDITURES, BY TYPE				
Political Contributions	Amount	Receptions, Meals, Food & Beverages	Amount	
Preparation & Distribution of Lobbying Materials	Amount	Media Advertising	Amount	
Entertainment & Events	Amount	Other		
		TOTAL n/q	JP 3/28/17	

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING					
Fees		Amount			
Compensation		Amount \$2000.00			
Contributions		Amount	4, 2, p., p., d		
Membership Fees		Amount			
☐ Check here if additional sheets	are attached	□ n/a			
PART V DESCRIPTION C	F SUBJECTS	ON WHICH	YOU LOBBIED		
☐Business & Economic Development	□Community Servi	ces	□Customer Services		
□Culture & Arts	□Housing		□Public Works, Infrastructure & Sustainability		
□Parks & Recreation	□Public Health, Sat	fety & Welfare	□Tourism		
□Transportation □Zoning & Planning		9	Bill No. (Year) Reso No. (Year) Admin. Rule No. (Year)		
□Other (indicate below):					
PART VI POLICY MAKING PROCESS DECISIONS YOU SOUGHT TO INFLUENCE AND OUTCOME					
1. None		4.			
2.		5.			
3.		☐ Check here if additional sheets are attached			
PART VII LOBBYIST CERTIFICATION					
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE DATE		Subscribed and sworn to before me This S day of Scur., ZO18. By: NOTARY OF ANY OFFICIAL AUTHORIZED TO ADMINISTER PATHS My commission expires: 11 AN SUSCIMILATION OF THE PATHS 12 AND SUSCIMILATION OF THE PATHS 13 AND SUSCIMILATION OF THE PATHS 14 AND SUSCIMILATION OF THE PATHS 15 AND SUSCIMILATION OF THE PATHS 16 AND SUSCIMILATION OF THE PATHS 17 AND SUSCIMILATION OF THE PATHS 18 AND SUSCIENCE OF THE PATHS 18 AND SUSCIMILATION OF THE PATHS 18 AND SUSCIENCE OF			
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PART I LOBBYIST

HONOLULU ETHICS COMMISSION 925 DILLINGHAM BOULEVARD, STE, 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

NAME (Last) (First) (Middle)		TELEPHONE			
Magana, Andrew		(808) 225-9378			
MAILING ADDRESS (Street)	,		FAX	
615 Piikoi St.					
#402		EMAIL			
(City)		(State)		andrewm@uber.com	
(City) Honolulu			(Zip Code) 96814		
LOBBYIST FIRM/EMPLOYE	R (Fill in only if yo	u are employed by a histines	s entity that has been retained to Johny)	TELEPHONE	
Uber Technologies, Inc			o only marines south desired to topby	202-794-7387	
MAILING ADDRESS (No. a	nd Street or	P.O Box)		FAX	
1455 Market Street, 4th Floor		,			
				EMAIL	
(City) San Francisco		(State) CA		(Zip Code)	
Sail Flancisco		CA		94103	
DARTH ORGANIZA	TION				
PART II ORGANIZA					
NAME OF ORGANIZATION	YOU LOBB	Y FOR (Do not a	bbreviate)	TELEPHONE	
Uber Technologies, Inc				202-794-7387	
MAILING ADDRESS (No. a	nd Street or	P.O Box)		FAX	
1455 Market Street, 4th Floor					
				EMAIL	
(City) San Francisco		(State) CA		(Zip Code)	
Can't Tancisco		- CA		94103	
PART III EXPENDIT	IIDEC D	VTVDE			
		TITE			
Political Contributions			Receptions, Meals, Food & Beverages	Amount	
Preparation & Distribution of Lobbying Materials	Amount		Media Advertising	Amount	
Entertainment & Events	Amount		Other		
			TOTAL 0.00		

Rev. 12/2017

Fees		Amount	Amount	
Compensation 10,000.00		Amount		
Contributions		Amount		
Membership Fees		Amount	Amount	
☐ Check here if additional sheets are attached		□ n/a		
PART V DESCRIPTIO	N OF SUBJECTS	ON WHICH	YOU LOBBIED	
□Business & Economic Development	□Community Serv	ices	□Customer Services	
□Culture & Arts	□Housing		□Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Sa	afety & Welfare	□Tourism	
			☐Specific Legislation:	
☑Transportation □Zoning & Planning		ng	Bill No. (Year) Reso No. (Year) Admin. Rule No. Dept.	
EOther (indicate below): PART VI POLICY MAN		ECISIONS		
	ГСОМЕ	14		
PART VI POLICY MAN	FCOME tation Network Companies	14		
PART VI POLICY MAP INFLUENCE AND OUT 1. Legislation related to Transpor 2. and associated products and s	FCOME tation Network Companies	5.		
PART VI POLICY MAP INFLUENCE AND OUT 1. Legislation related to Transport 2. and associated products and states 3.	FCOME tation Network Companies ervices	5.	YOU SOUGHT TO	
PART VI POLICY MAP INFLUENCE AND OUT 1. Legislation related to Transport 2. and associated products and standard products and stan	TCOME tation Network Companies ervices CERTIFICATION	4. 5. Check her	YOU SOUGHT TO	
PART VI POLICY MAP INFLUENCE AND OUT 1. Legislation related to Transport 2. and associated products and state 3. PART VII LOBBYIST (I hereby certify that the foregoin	TCOME tation Network Companies ervices CERTIFICATION	4. 5. Check her	YOU SOUGHT TO Te if additional sheets are attached and sworn to before me av of January 2018	
PART VI POLICY MAP INFLUENCE AND OU 1. Legislation related to Transpor 2. and associated products and s 3. PART VII LOBBYIST (I hereby certify that the foregoin and correct.	TCOME tation Network Companies ervices CERTIFICATION	4. 5. Check her	YOU SOUGHT TO Te if additional sheets are attached	
PART VI POLICY MAP INFLUENCE AND OUT 1. Legislation related to Transport 2. and associated products and state 3. PART VII LOBBYIST OF THE PROPERT OF THE PROPERT OF THE PROPERT OF THE PROPERT OF THE PART VII LOBBY STORY	TCOME tation Network Companies ervices CERTIFICATION	4. 5. Check here Subscribed at This 8th da By:	YOU SOUGHT TO Te if additional sheets are attached and sworn to before me av of January 2018	
PART VI POLICY MAP INFLUENCE AND OUT 1. Legislation related to Transpor 2. and associated products and s 3. PART VII LOBBYIST (I hereby certify that the foregoin and correct. LOBBY ST SIGNATURE DATE Date: No Date # Pages: 2	TCOME tation Network Companies ervices CERTIFICATION	Subscribed at This But do By: NOTARY OR ANY My commission	YOU SOUGHT TO Te if additional sheets are attached and sworn to before me ay of	
PART VI POLICY MAP INFLUENCE AND OUT 1. Legislation related to Transpor 2. and associated products and s 3. PART VII LOBBYIST (I hereby certify that the foregoin and correct. LOBBY ST SIGNATURE DATE DATE DATE	tation Network Companies ervices CERTIFICATION ag statements are true	Subscribed at This But do By: NOTARY OR ANY My commission	YOU SOUGHT TO The if additional sheets are attached and sworn to before me any of	

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NOTARY CERTIFICATION



Rev. 12/2017

HONOLULU ETHICS COMMISSION

925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

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Lobbyist Annual Report (Type or Print Clearly)

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PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Malinoski, Jódi, Lilia Aik	808-538-6616	
MAILING ADDRESS (Street)		FAX
PO 80X 2577		EMAIL JODI.MALINOSKI® Sierraclub.org
(City)	(State)	(Zip Code)
Honolyly	Hawaii	96803
LOBBYIST FIRM/EMPLOYER (Fill in only if you		TELEPHONE
sierra Club of Hawaii (Oahu Group)	808-538-6616
MAILING ADDRESS (No. and Street or I	P.O Box)	FAX
PO 80x 2577		EMAIL Sierra hawaii.chapter @ org
(City)	(State)	(Zip Code)
Honolulu	Hawaii	96803

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBE	BY FOR (Do not abbreviate)	TELEPHONE
sierra Club of Hawaii		808-538-6616
MAILING ADDRESS (No. and Street or	P.O Box)	FAX
PO BOX 2577		
		EMAIL hawaii.chapter @ sierradub.org
		@ Sierradub.org
(City)	(State)	(Zip Code)
Honoluly	Hawaii	96803

PART III EXPENDITURES, BY TYPE						
Political Contributions	Amount	0	Receptions, Meals, Food & Beverages	Amount		
Preparation & Distribution of Lobbying Materials	Amount	0	Media Advertising	Amount		
Entertainment & Events	Amount	0	Other			
ite of Hawan commission expires; April 5, 2021		MINISTER OF STREET	TOTAL ()			

PART IV FEES, COMPEN YOU RECEIVED FOR TH	-		NS AND MEMBERSHIP FEES	
Fees		Amount		
Compensation		Amount \$ 7,027.20		
Contributions		Amount		
Membership Fees		Amount		
☐ Check here if additional sheets are attached		□ n/a		
PART V DESCRIPTION C	F SUBJECTS	ON WHICH	YOU LOBBIED	
☐Business & Economic Development	□Community Servi	ces	□Customer Services	
□Culture & Arts	☑Housing		☑Public Works, Infrastructure & Sustainability	
☑Parks & Recreation	□Public Health, Sat	fety & Welfare	□Tourism	
☑Transportation ☑Zoning & Planning		g	□Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept	
□Other (indicate below):				
PART VI POLICY MAKING	G PROCESS D	ECISIONS	YOU SOUGHT TO	
INFLUENCE AND OUTCO	OME			
1. Bill 57 (2016) - Engoted 2. Bill 59 (2016) - Engoted		7. 6111 79 (2017) - Passed 2nd reading 8. Resolution 17-237 - Adopted		
3. Bill 67 (2016) - Enacted 4. Bill 25 (2017) - Enacted		9. Resolution 17-238 - Adopted io. Resolution 17-284 - Adopted		
5. Bill 1 (2017) - Deferred i 6. Bill 71 (2017) - Deferred i		☐ Check here if additional sheets are attached		
PART VII LOBBYIST CEF	RTIFICATION			
I hereby certify that the foregoing sta and correct.	William.	Subscribed and sworn to before me This War day of Danway, MIE.		
LOBBYIST SIGNATURE 1/10/17 DATE		NOTARY OR ANY O	MUTSUKO CARAULIA DEFICIAL AUTHORIZED TO ADMINISTER OATHS In expires: Notary Public, First Judicial Circuit State of Hawaii	
	William III	MAND 10	1) 10 18 Doc. Date: Commission expires: April 5 2021 2 Name: Note to Circuit Dec. Description: Armael Reprot	

Deadline: January 10 of Each Year NOTE: This is a public document of Each Year

Rev. 12/2017

Date



PART I LOBBYIST

NAME (Last) (First) (Middle)

MARCUS, KENNETH B.

HONOLULU ETHICS COMMISSION

925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR SPECIAL RECEIVED

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TELEPHONE

(808) 537-6100

ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

MAILING ADDRESS (Street		FAX (808) 537-5434			
733 BISHOP STREET, SUITE		EMAIL			
				kmarcus@starnlaw.com	
(City) HONOLULU		(Zip Code)			
		96813			
LOBBYIST FIRM/EMPLOYE	s entity that has been retained to lobby)	TELEPHONE			
STARN O'TOOLE MARCUS &	FISHER			(808) 537-6100	
MAILING ADDRESS (No. a)	nd Street or	P.O Box)		FAX (808) 537-5434	
733 BISHOP STREET, SUITE	1900				
				EMAIL	
(City)		(State) HAWAII		(Zip Code)	
HONOLULU		HAWAII		96813	
PART II ORGANIZA					
NAME OF ORGANIZATION		BY FOR (Do not a	bbreviate)	TELEPHONE	
PARK HOTELS & RESORTS I	NC:			(703) 584-7979	
MAILING ADDRESS (No. a	nd Street or	P.O Box)		FAX	
1600 TYSONS BOULEVARD,	10TH FLOO	R			
				EMAIL	
(City) MCLEAN		(State) VIRGINIA		(Zip Code)	
` ''MCLEAN		VIRGINIA		22102	
PART III EXPENDIT		3Y IYPE			
Political Contributions	Amount		Receptions, Meals, Food & Beverages	Amount	
Preparation & Distribution of Lobbying Materials	Amount		Media Advertising	Amount	
Entertainment & Events	Amount		Other		
			TOTAL 0		

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING					
Fees		Amount \$4,0			
Compensation		Amount			
Contributions		Amount			
Membership Fees		Amount			
☐ Check here if additional sheets are attached		□ n/a			
PART V DESCRIPTION O	F SUBJECTS	ON WHICH	YOU LOBBIED		
□Business & Economic Development	□Community Servi		□Customer Services		
□Culture & Arts	□Housing		□Public Works, Infrastructure & Sustainability		
□Parks & Recreation	□Public Health, Sa	fety & Welfare	⊠Tourism		
□Transportation	□Transportation		Bill No(Year)		
□Other (indicate below):					
PART VI POLICY MAKING		ECISIONS	YOU SOUGHT TO		
1. INTRODUCTION & ADOPTION OF		4.			
2.		5.			
3.		☐ Check here if additional sheets are attached			
PART VII LOBBYIST CER	RTIFICATION				
I hereby certify that the foregoing stand correct. LOBBYIST SIGNATURE JANUARY 10, 2018 DATE	atements are true		on expires:		

Doc. Date: January 10, 2018 ☐ Undated at time of notarization Document Description: City and County of Honolulu Ethics Commission Lobbyist Annual Report for Kenneth B. Marcus (Park Hotels & Resorts Inc.) No. of Pages: 3 Jurisdiction: First Judicial Circuit Honolulu, Hawaii Augury 10, 2018 Signature of Notary Date of Notarization and Certification Statement

Bernadette A. Lee

Printed Name of Notary

(Official Stamp or Seal)



HONOLULU ETHICS COMMISSION 925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: gthks@honolulu.gov/ethkcs/ Website: http://www.honolulu.gov/ethkcs/ THIS SPACE FOR OFFICE USE ONLY

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

NAME OF A STREET				
NAME (Last) (First)	(Middle)			TELEPHONE
Marrone, Gladys Q.				808-629-7509
MAILING ADDRESS	S (Street)			FAX
94-487 Akoki Street				FMAII
				EMAIL "
(City) Waipahu	(State) HI			gqm@biahawaii.org (Zip Code)
				96797
LOBBYIST FIRM/EMP	PLOYER (FIll in on	ily if you are employed by a	business entity that has been retained to lobby)	TELEPHONE
MAILING ADDRESS (I	No. and Street	or P.O Box)		FAX
				1700
				EMAIL
Oit A				
City)		(State)		(Zip Code)
ART II ORGANI	ZATION			
MF OF ORGANIZATI	ION VOLLLOS	PRV FOR (Da =	-4 -1.1	
ME OF ORGANIZATI	ION YOU LOS	BBY FOR (Do n	ot abbreviate)	TELEPHONE
ding Industry Association	on of Hawaii /		ot abbreviate)	TELEPHONE 808-629-7509
ding Industry Association ILING ADDRESS (No	on of Hawaii /		ot abbreviate)	808-629-7509
ding Industry Association	on of Hawaii /		ot abbreviate)	
ding Industry Association ILING ADDRESS (No	on of Hawaii /		ot abbreviate)	808-629-7509 FAX
ding Industry Association ILING ADDRESS (No. 87 Akoki Street	on of Hawaii /	or P.O Box)	ot abbreviate)	808-629-7509 FAX EMAIL
ding Industry Association ILING ADDRESS (No. 87 Akoki Street	on of Hawaii /	or P.O Box)	ot abbreviate)	FAX EMAIL. gqm@biahawaii.org
ding Industry Association ILING ADDRESS (No	on of Hawaii /		ot abbreviate)	FAX EMAIL. gqm@biahawaii.org (Zip Code)
ding Industry Association ILING ADDRESS (No 87 Akoki Street) Waipahu	on of Hawaii / o. and Street o	(State)	ot abbreviate)	FAX EMAIL. gqm@biahawaii.org
ding Industry Association ILING ADDRESS (No 87 Akoki Street) Waipahu	on of Hawaii / o. and Street o	(State)	ot abbreviate)	FAX EMAIL. gqm@biahawaii.org (Zip Code)
ding Industry Association ILING ADDRESS (No. 87 Akoki Street Waipahu TIII EXPENDI	on of Hawaii / and Street of	(State)		FAX EMAIL. gqm@biahawaii.org (Zip Code) 96797
ding Industry Association ILING ADDRESS (No 87 Akoki Street) Waipahu	on of Hawaii / o. and Street o	(State)	Receptions, Meals, Foo	FAX EMAIL. gqm@biahawaii.org (Zip Code) 96797
ding Industry Association ILING ADDRESS (No. 187 Akoki Street Waipahu RT III EXPENDITAL CONTRIBUTIONS	TURES, E	(State)	Receptions, Meals, Foo & Beverages	808-629-7509 FAX EMAIL. gqm@biahawaii.org (Zip Code) 96797 od Amount
ding Industry Association ILING ADDRESS (No. 187 Akoki Street Waipahu RT III EXPENDITION The Contributions The Contribution of the Contribution	on of Hawaii / and Street of	(State)	Receptions, Meals, Foo	FAX EMAIL. gqm@biahawaii.org (Zip Code) 96797
ding Industry Association ILING ADDRESS (No. 187 Akoki Street Waipahu RT III EXPENDITAL Contributions Cation & Distribution Dying Materials	TURES, E Amount	(State)	Receptions, Meals, Foo & Beverages Media Advertising	808-629-7509 FAX EMAIL. gqm@biahawaii.org (Zip Code) 96797 od Amount
ding Industry Association ILING ADDRESS (No. 187 Akoki Street Waipahu RT III EXPENDITION The Contributions The Contribution of the Contribution	TURES, E	(State)	Receptions, Meals, Foo & Beverages	808-629-7509 FAX EMAIL. gqm@biahawaii.org (Zip Code) 96797 od Amount
ding Industry Association ILING ADDRESS (No. 187 Akoki Street Waipahu RT III EXPENDITAL Contributions Cation & Distribution Dying Materials	TURES, E Amount	(State)	Receptions, Meals, Foo & Beverages Media Advertising	808-629-7509 FAX EMAIL. gqm@biahawaii.org (Zip Code) 96797 od Amount
ding Industry Association ILING ADDRESS (No. 187 Akoki Street Waipahu RT III EXPENDITAL Contributions Cation & Distribution Dying Materials	TURES, E Amount	(State)	Receptions, Meals, Foo & Beverages Media Advertising	808-629-7509 FAX EMAIL. gqm@biahawaii.org (Zip Code) 96797 od Amount

Fees		Amount			
Compensation		Amount \$2600	.00		
Contributions		Amount			
Membership Fees		Amount			
☐ Check here if additional s	sheets are attached	□ n/a	□ n/a		
PART V DESCRIPTION	ON OF SUBJECTS	ON WHICH	YOU LOBBIED		
Business & Economic		Color of the color of the color	□Customer Services		
Culture & Arts	⊠Housing		☑Public Works, Infrastructure & Sustainability		
Parks & Recreation	□Public Health, S	Safety & Welfare	□Tourism		
Transportation ⊠Zoning & Planning		ning	□Specific Legislation: Bill No. (Year) Reso No. (Year) Admin. Rule No. Dept.		
Other (indicate below): ART VI POLICY MA IFLUENCE AND OU Affordable housing requirement	TCOME	DECISIONS 4.	YOU SOUGHT TO		
ART VI POLICY MA IFLUENCE AND OU	TCOME	4.	YOU SOUGHT TO re if additional sheets are attached		
ART VI POLICY MA IFLUENCE AND OU	nts	4. 5. □ Check he			
ART VI POLICY MA IFLUENCE AND OU Affordable housing requiremen	CERTIFICATION ing statements are true	Subscribed a This 5/10 c	re if additional sheets are attached and swom to before me		

Rev.



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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Lobbyist Annual Report (Type or Print Clearly)

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-				
PART I LOBBYIST				
NAME (Last) (First) (Middle) /			TELEPHONE
MARUJAMA MAILING ADDRESS (Stree 1020 South Devel	LISA	- 1.		(808)384-5568
MAILING ADDRESS (Stree	t) ⁾			FAX
1020 South Devel	tania St			·
				EMAIL Imaruyama a hano-haran.s.
(City) HonoLulu		(State) H		(Zip Gode) 4
LOBBYIST FIRM/EMPLOYI	ER (Fill in only if yo	ou are employed by a busine	ss entity that has been retained to lobby)	TELEPHONE
M		- 3		
MAILING ADDRESS (No. a	nd Street or	P.O Box)		FAX
				EMAIL
(City)		(State)		(Zip Code)
PART II ORGANIZA	TION			
NAME OF ORGANIZATION	YOU LOBB	Y FOR (Do not a	lbbreviate)	TELEPHONE
Hawaii Alliance of	- Nonprof	it Organizat	tions (HANO)	(808) 529 - 0454
MAILING ADDRESS (No. a	nd Street or	P.O Box)		FAX
1020 South Bereta				
	••			EMAIL Maruyama @ hano honon
(City) Honolulu		(State)		(Zip Code) 96814
PART III EXPENDIT	URES, B	BY TYPE		
Political Contributions	Amount	D	Receptions, Meals, Food & Beverages	Amount _O
Preparation & Distribution of Lobbying Materials	Amount	0	Media Advertising	Amount ₀
Entertainment & Events	Amount	0	Other	
			TOTAL O	

•	PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING						
Fees		Amount					
Compensation		Amount 4	122.00				
Contributions		Amount					
Membership Fees		Amount					
☐ Check here if additional sheets	are attached	□ n/a					
PART V DESCRIPTION O	F SUBJECTS	ON WHICH	YOU LOBBIED				
☐Business & Economic Development	Community Service	ces	□Customer Services				
□Culture & Arts	□Housing	•	□Public Works, Infrastructure & Sustainability				
□Parks & Recreation	□Public Health, Saf	ety & Welfare	□Tourism				
□Transportation	□Zoning & Planning	3	Specific Legislation: Bill No (Year) 20 17 Reso No (Year) Admin. Rule No Dept				
☐Other (indicate below):							
PART VI POLICY MAKING		ECISIONS	YOU SOUGHT TO				
1. pill 78 (17) - Deferred &	10 0/2/18	4.					
2.		5.					
3.		☐ Check here if additional sheets are attached					
TATELY ARRANGE OFF							
PART VII LOBBYIST CER	ITIFICATION		Land William				
I hereby certify that the foregoing sta and correct.	atements are true		nd sworn to before me				
arm		This da By:	y of				
LOBBYIST SIGNATURE			OFFICIAL AUTHORIZED TO ADMINISTER OATHS				
DATE		My commissio					
	,	1					

Deadline: January 10th of Each Year NOTE: This is a public document

Rev. 12/2017

STATE OF HAWAII)) SS.	
CITY AND COUNTY OF HONOLULU)	
On this 6 day of ANUA appeared 6 To MARUYA me on the basis of satisfactory evidence, that such person executed the foregoing executed the same as the person's free act and the same as the person and the same as the person and the same as the person are also as the person and the same as the person are also as the person are	who, being by me duly sworn of instrument, and acknowledged to	or affirmed, did say that such person
Document Date:JAN 1 0 2018	No. of Pages: 2	MIS PAGE
Notary Name: LAURA F. WOODS		1st Circuit
Document Description: ANNAL REPORT	REPORT - LOBBYIST	- Seaf WOODS
LeAs	JAN 1.0 2018	NO 98-492
Notary Signature	Date	ATE OF



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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PARTILOBBYIST		
NAME (Last) (First) (Middle)	TELEPHONE	
Masatsugv, Jeffréy S.	808-554-3406	
MAILING ADDRESS (Street)		FAX
P.O. Box 22534		
		EMAIL
(City) _{Honolulu}	(City) _{Honolulu} (State) _{HI}	
LOBBYIST FIRM/EMPLOYER (Fill in only if)	ou are employed by a business entity that has been retained to lobby)	TELEPHONE
JM Consulting LLC		808-554-3406
MAILING ADDRESS (No. and Street or P.O. Box 22534	FAX	
		EMAIL
(City) Honolulu	(State)	(Zip Code)
Horiolulu	П	96823
PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBI	BY FOR (Do not abbreviate)	TELEPHONE
Carpet, Linoleum and Soft Tile Local Union	·	808-554-3406
MAILING ADDRESS (No. and Street or	<u> </u>	FAX
222 S. Vineyard Blvd	1700	
PH4		EMAIL
(City) Honolulu (State)		(Zip Code)
		96813
DART III EVDENDITURES	DV TVDE	

PART III EXPENDI	TURES, BY TYPE		
Political Contributions	Amount 0	Receptions, Meals, Food & Beverages	Amount 0
Preparation & Distribution of Lobbying Materials	Amount 0	Media Advertising	Amount 0
Entertainment & Events	Amount 0	Other ₀	
		TOTAL 0	

PART IV FEES, COMPEN YOU RECEIVED FOR TH			NS AND MEMBERSHIP FEES	
Fees		Amount 0		
Compensation		Amount 10000)	
Contributions		Amount 0		
Membership Fees		Amount 0		
☐ Check here if additional sheets	are attached	⊠ n/a		
PART V DESCRIPTION C	OF SUBJECTS	ON WHICH	YOU LOBBIED	
■Business & Economic Development	□Community Servi		□Customer Services	
□Culture & Arts	⊠Housing		☑Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism	
⊠ Transportation	■Zoning & Planning		□Specific Legislation: Bill No. (Year) Reso No. (Year) Admin. Rule No. Dept.	
☐Other (indicate below):				
DART VI DOLLOV MAKIN	C DDOCECC D	FOICIONS	VOLL COLLOUT TO	
PART VI POLICY MAKING INFLUENCE AND OUTCO		ECISIONS	YOU SOUGHT TO	
¹ . _{Bill} 3 (2016)		4. Resolution 17-305		
2. Resolution 17-42		5. Resolution 17-175		
3. Resolution 17-221		☐ Check here if additional sheets are attached		
PART VII LOBBYIST CEF	RTIFICATION			
			4	
I hereby certify that the foregoing statements are true and correct. Jeffrey S. Masatsugu		Subscribed and sworn to before me And day of JANUARY By By By By By By By By By B		
LOBBYIST SIGNATURE		TARS OF ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS KIMBERLY L. ZIPP		
DATE	Z PU X STAT	My commission expires:		
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Doc. Date: 01-09.2019

Pages: 2

Name: Kimberly L. Zipp

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KEPDET

First Circuit

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Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Masatsugu, Jeffrey S. /		808-554-3406
MAILING ADDRESS (Street) P.O. Box 22534		FAX
		EMAIL
(City) _{Honolulu}	(State) _{HI}	(Zip Code) 96823
LOBBYIST FIRM/EMPLOYER (Fill in only if yo	u are employed by a business entity that has been retained to lobby)	TELEPHONE
JM Consulting LLC		808-554-3406
MAILING ADDRESS (No. and Street or P.O. Box 22534	P.O Box)	FAX
	EMAIL	
(City) _{Honolulu} (State) _{HI}		(Zip Code)
i ioriolulu .	96823	
DART II ODGANIZATION		

PART II ORGANIZATION				
NAME OF ORGANIZATION	NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			
Hawaii Tapers Market Recovery	808-554-3406			
MAILING ADDRESS (No. an 222 S. Vineyard Blvd	FAX			
PH4	EMAIL			
(City) Honolulu	(State)	(Zip Code)		
, ionolaid	· · ·	96813		

PART III EXPENDIT	TURES, BY TYPE		
Political Contributions	Amount 0	Receptions, Meals, Food & Beverages	Amount 0
Preparation & Distribution of Lobbying Materials	Amount 0	Media Advertising	Amount 0
Entertainment & Events	Amount 0	Other ₀ ,	
		TOTAL 0	

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING				
Fees		Amount 0		
Compensation		Amount 11250)	
Contributions		Amount 0		
Membership Fees		Amount 0		
☐ Check here if additional sheets	s are attached	🗷 n/a		
PART V DESCRIPTION C	F SUBJECTS	ON WHICH	YOU LOBBIED	
■Business & Economic Development	□Community Servi	ces	☐ Customer Services	
□Culture & Arts	⊠Housing		☑Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism	
⊠ Transportation	I Zoning & Planning		□ Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept	
□Other (indicate below):				
PART VI POLICY MAKIN		ECISIONS	YOU SOUGHT TO	
¹ . _{Bill} 3 (2016)		4. Resolution 1	7-305	
2. Resolution 17-42		5. Resolution 17-175		
3. Resolution 17-221		☐ Check here if additional sheets are attached		
PART VII LOBBYIST CER	RTIFICATION	•		
I hereby certify that the foregoing statements are true and correct. Jeffrey S. Masatsugu LOBBYIST SIGNATURE		MOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS		
DATE	* 06.78	My commission	Notary Certificate on Back	

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First Circuit

Name: Kimberly L. Zipp First

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PART I LOBBYIST

HONOLULU ETHICS COMMISSION

925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

NAME (Last) (First) (Middle)			TELEPHONE	
Masatsugu, Jeffrey S.			808-554-3406	
MAILING ADDRESS (Street) P.O. Box 22534			FAX	
				EMAIL
(City) _{Honolulu}		(State)		(Zip Code) 96823
LOBBYIST FIRM/EMPLOYI	ER (Fill in only if you	are employed by a busines	s entity that has been retained to lobby)	TELEPHONE
JM Consulting LLC				808-554-3406
MAILING ADDRESS (No. a P.O. Box 22534	nd Street or F	P.O Box)		FAX
				EMAIL
(City) Honolulu		(State)		(Zip Code)
Honolulu		П		96823
		- Winds		
PART II ORGANIZA				
NAME OF ORGANIZATION				TELEPHONE
Hawaii Glaziers, Architectural I	Metal Glasswo	orkers Local Unior	1889 AFL-CIO Stabilization	808-554-3406
MAILING ADDRESS (No. a 222 S. Vineyard Blvd	nd Street or F	P.O Box)		FAX
PH4				EMAIL
(City) _{Honolulu}	(State)			(Zip Code) 96813
				30010
PART III EXPENDIT	URES, B	Y TYPE		
Political Contributions	Amount Receptions, Meals, Food & Beverages			Amount 0
Preparation & Distribution	Amount		Amount	

PART III EXPENDIT	TURES, BY TYP	E	
Political Contributions	Amount 0	Receptions, Meals, Food & Beverages	Amount 0
Preparation & Distribution of Lobbying Materials	Amount 0	Media Advertising	Amount 0
Entertainment & Events	Amount 0	Other ₀	
		TOTAL 0	

PART IV FEES, COMPEN YOU RECEIVED FOR TH			NS AND MEMBERSHIP FEES
Fees		Amount 0	
Compensation	e el 25 55 55 55 55 55 55 55 55 55 55 55 55	Amount 11250)
Contributions		Amount 0	
Membership Fees		Amount 0	
☐ Check here if additional sheet	s are attached	🗷 n/a	
PART V DESCRIPTION (OF SUBJECTS	ON WHICH	YOU LOBBIED
☑Business & Economic Development	□Community Servi	ces	□Customer Services
□Culture & Arts	⊠ Housing		☑Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism
■Transportation	I Zoning & Planning		Bill No(Year)
☐Other (indicate below):	Other (indicate below):		
PART VI POLICY MAKIN		ECISIONS	YOU SOUGHT TO
¹ .Bill 3 (2016)		4. Resolution 17	7-305
2. Resolution 17-42		⁵ .Resolution 17-175	
3. Resolution 17-221		☐ Check here if additional sheets are attached	
PART VII LOBBYIST CEI	RTIFICATION		
I hereby certify that the foregoing stand correct. Jeffrey S. Masatsugu LOBBYIST SIGNATURE 1/9/2018 DATE	tatements are true	HAME OTH DE	of JANNARY 2018. DEFICIAL AUTHORIZED TO ADMINISTER OATHS KIMBERLY L. ZIPP OF EXPRESSION OF PROCESSION OF PROCESS
	TIME OF	HANTHI	Notary Certificate on Back

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Pages:

Name: Kimberly L. Zipp

Name: Kimberly L. Zipp First Circuit

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Signature

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01-09-2018 Date





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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST	W = 0			
NAME (Last) (First) (Middle)				TELEPHONE
Masatsugu, Jeffrey S.			808-554-3406	
MAILING ADDRESS (Street	t)			FAX
P.O. Box 22534				
			•	EMAIL
(City) _{Honolulu}		State)	В	(Zip Code) 96823
LOBBYIST FIRM/EMPLOYE	ER (Fill in only if you are	employed by a busines:	s entity that has been retained to lobby)	TELEPHONE
JM Consulting LLC				808-554-3406
MAILING ADDRESS (No. a P.O. Box 22534	nd Street or P.O	Box)		FAX
				EMAIL
(City) Honolulu		State)		(Zip Code)
` 'Honolulu		'HI		96823
PART II ORGANIZA	TION			
NAME OF ORGANIZATION		OR (Do not al	hhreviate)	TELEPHONE
Painting Industry of Hawaii Lat		•	,	808-554-3406
MAILING ADDRESS (No. a	_	,	dot i dila-	FAX
222 S. Vineyard Blvd, PH4	0. 1 10 10010110	, DOX)		
				EMAIL
(City) Honolulu	(St	ate) HI	g , comp	(Zip Code) 96813
				00010
PART III EXPENDIT	URES, BY	TYPE	a	
Political Contributions	Amount Receptions, Meals, Food & Beverages		i Amount 0	
Preparation & Distribution	Amount		Media Advertising	Amount
of Lobbying Materials Entertainment & Events	0 Amount		Other ₀	0
Littertainment & Events	0		0	
	6		TOTAL 0	

PART IV FEES, COMPEN YOU RECEIVED FOR TH	•		NS AND MEMBERSHIP FEES		
Fees		Amount 0			
Compensation		Amount 11250			
Contributions		Amount 0			
Membership Fees		Amount 0			
☐ Check here if additional sheets are attached		⊠ n/a			
PART V DESCRIPTION (OF SUBJECTS	ON WHICH	YOU LOBBIED		
☑Business & Economic Development	□Community Servi		□Customer Services		
□Culture & Arts	⊠Housing				
□Parks & Recreation	□Public Health, Safety & Welfare		□Tourism		
⊠ Transportation	⊠ Zoning & Planning		Bill No(Year) Reso No(Year) Admin. Rule No Dept		
□Other (indicate below):					
PART VI POLICY MAKIN		ECISIONS	YOU SOUGHT TO		
1. Bill 3 (2016)		⁴ .Resolution 17-305			
2. Resolution 17-42		5. Resolution 17-175			
3. Resolution 17-221		☐ Check here if additional sheets are attached			
PART VII LOBBYIST CERTIFICATION					
I hereby certify that the foregoing stand correct. Jeffrey S. Masatsugu LOBBYIST SIGNATURE 1/9/2018		Subscribed and sworn to before me Holis day of JANUARY 2018 Komboly France No Add Service of Combon States of Combon State			
DATE		Notary Certificate on Back			

Doc. Date: 01-09-2018

#Pages: 2 Name: Kimberly L. Zipp

Doc. Description: ANNUAL

First Circuit

NOTARY CERTIFICATION





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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
MATSUNAMI, GARRET		(808) 548-4811
MAILING ADDRESS (Street)		FAX (808) 548-2975
680 IWILEI ROAD, SUITE 510		EMAIL EMAIL
(City) HONOLULU	(State) HAWAII	(Zip Code) 96817
LOBBYIST FIRM/EMPLOYER (Fill in only if yo	TELEPHONE	
CASTLE & COOKE HOMES HAWAII, INC	(808) 548-4188	
MAILING ADDRESS (No. and Street or P.O Box) 680 IWILEI ROAD, SUITE 510		FAX (808) 548-2975
		EMAIL gmatsunami@castlecooke.com
(City) HONOLULU	(State) HAWAII	(Zip Code) 96817

PART II ORGANIZAT	ION	
NAME OF ORGANIZATION	TELEPHONE	
CASTLE & COOKE HOMES H	(808) 548-4811	
MAILING ADDRESS (No. and	FAX (808) 548-2975	
680 IWILEI ROAD, SUITE 510		EMAIL
(City) HONOLULU	(State) HAWAII	(Zip Code) 96817

PART III EXPENDIT	TURES, BY TYPE			
Political Contributions	Amount 0.00	Receptions, Meals, Food & Beverages	Amount 0.00	
Preparation & Distribution of Lobbying Materials	Amount 0.00	Media Advertising	Amount 0.00	
Entertainment & Events	Amount 0.00	Other _{0.00}		
		TOTAL 0.00		

Deadline: January 10th of Each Year NOTE: This is a public document

Rev. 12/2017 Deadline: January 10

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING					
Fees		Amount			
Compensation		Amount			
Contributions		Amount			
Membership Fees		Amount			
☐ Check here if additional sheets are attached		⊠ n/a			
PART V DESCRIPTION C	F SUBJECTS	ON WHICH	YOU LOBBIED		
☑Business & Economic Development	□Community Servi	ces	□Customer Services		
□Culture & Arts	⊠Housing		☑ Public Works, Infrastructure & Sustainability		
□Parks & Recreation	□Public Health, Safety & Welfare		□Tourism		
⊠Transportation	⊠Zoning & Planning		Bill No(Year) Reso No(Year) Admin. Rule No Dept		
□Other (indicate below):					
PART VI POLICY MAKING PROCESS DECISIONS YOU SOUGHT TO INFLUENCE AND OUTCOME					
1. _{N/A}		4.			
2.		5.			
3.		☐ Check here if additional sheets are attached			
PART VII LOBBYIST CERTIFICATION					
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE JAN - 8 2018 DATE NOTABY CERTIFICATION No. 96.313		Subscribed and sworn to before me OKO PATOR State of Hawaii No. 96-312 KYOKO PATOR, State of Hawaii No. 96-312 NOTARY OF MAY OFFICIAL AUTHORIZED TO ADMINISTER OATHS My commission expires: June 14, 2020			

Rev. 12/2017

Notary Signature

First Judicial Discussion

First Judicial Discussion

First Judicial Discussion

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January 10th of Each Year

Notary Signature

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HONOLULU ETHICS COMMISSION

Amount

925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/

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HONOLULU ETHICS COMMISSION RECEIVED

ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

18 JAN 19 A10:43

TAITTEODDING				
NAME (Last) (First) (Middle	9)			TELEPHONE
McClellan, WilliamHenry Keko	оа			8083937937
MAILING ADDRESS (Stree 87855 C Farrington Hwy.	et)			FAX
				EMAIL kekoamcclellan@gmail.com
(City) _{Maili}		(State) _{HI}		(Zip Code) 96792
LOBBYIST FIRM/EMPLOYER (Fill in only if you are employed by a business entity that has been retained to lobby)				TELEPHONE
The McClellan Group, LLC				8083937937
MAILING ADDRESS (No. and Street or P.O Box) 87855 C Farrington Hwy.				FAX
				EMAIL kekoamcclellan@gmail.com
(City) _{Maili}	.0.0	(State) _{HI}	92.48	(Zip Code) 96792
PART II ORGANIZA				
NAME OF ORGANIZATION		,	abbreviate)	TELEPHONE
The American Hotel and Lodging Association /				202.289.3125
MAILING ADDRESS (No. and Street or P.O Box) 1250 I St. NW Suite 1100				FAX
				EMAIL
(City) Washington DC		(State)		(Zip Code) 2005
				
PART III EXPENDIT	TURES, E	BY TYPE		
Political Contributions	Amount 0		Receptions, Meals, Food & Beverages	Amount 0
Preparation & Distribution of Lobbying Materials	Amount 0		Media Advertising	Amount 0

Deadline: January 10th of Each Year NOTE: This is a nublic document

Other 0

TOTAL 0

of Lobbying Materials

Entertainment & Events

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES				
YOU RECEIVED FOR TH	E PURPOSE O	Amount 0		
Compensation		Amount 52,35	10.00	
Contributions		Amount ⁰		
Membership Fees		Amount ⁰		
☐ Check here if additional sheets are attached		≌ n/a		
PART V DESCRIPTION O	F SUBJECTS	ON WHICH	YOU LOBBIED	
☑ Business & Economic Development	□Community Servi	ces	□Customer Services	
□Culture & Arts	■Housing		□Public Works, Infrastructure & Sustainability	
□Parks & Recreation	≝ Public Health, Sa	fety & Welfare	≝ Tourism	
□Transportation	■Zoning & Planning		□Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept	
■Other (indicate below):	,			
PART VI POLICY MAKING		ECISIONS	YOU SOUGHT TO	
1. Short Term Rental Regulation		4. Policy affecting hotel and lodging operators		
2. LUO Amendments		5. Policies affecting members of AHLA		
3. Policy related to housing and homele	essness	☐ Check here if additional sheets are attached		
PART VII LOBBYIST CERTIFICATION				
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE 19- Janes 2019 DATE		Subscribed and sworn to before me This 19 day of		

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Signature	OTARY CERTIFIC	Date	1 9 201 8





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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

18 JAN 19 A10:42

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
McClellan, WilliamHenry Kekoa		8083937937
MAILING ADDRESS (Street)		FAX
87855 C Farrington Hwy.		
		EMAIL
		kekoamcclellan@gmail.com
(City) _{Maili}	(State) HI	(Zip Code)
iviaiii	П	96792
LOBBYIST FIRM/EMPLOYER (Fill in only if yo	TELEPHONE	
The McClellan Group, LLC		8083937937
MAILING ADDRESS (No. and Street or	P.O Box)	FAX
87855 C Farrington Hwy.		
		EMAIL
		kekoamcclellan@gmail.com
(City) Maili (State) HI		(Zip Code)
ivialii	П	96792

PART II ORGANIZAT	TION	
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
Park Hotels and Resorts Inc.		703.584.7979
MAILING ADDRESS (No. and Street or P.O Box)		FAX
1600 Tysons Blvd. 10th floor		
		EMAIL
(City) Mclean	(State) VA	(Zip Code) 22102

PART III EXPENDIT	TURES, BY TYPE		
Political Contributions	Amount 0	Receptions, Meals, Food & Beverages	Amount 0
Preparation & Distribution of Lobbying Materials	Amount 0	Media Advertising	Amount 0
Entertainment & Events	Amount 0	Other 0	
		TOTAL 0	1.421.400

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Fees		Amount 0	
Compensation		Amount 10,23	37.50
Contributions		Amount 0	
Membership Fees		Amount 0	
☐ Check here if additional sheets are attached		☑ n/a	
PART V DESCRIPTIO	N OF SUBJECTS	ON WHICH	I YOU LOBBIED
☑Business & Economic Development	□Community Servi		□Customer Services
☐Culture & Arts	☑Housing		☑Public Works, Infrastructure & Sustainability
□Parks & Recreation	☑Public Health, Sa	ifety & Welfare	☑Tourism
☑ Transportation ☑ Zoning & Planning ☑ Other (indicate below):			Bill No(Year)_ Reso No. 303
INFLUENCE AND OUT			•
		4. Policies related to the Department of Planning and Permitt 5. Delicies related to the Department of Planning and Permitt	
2. Policies affecting hotel owners	and operators	Policies related to the Department of Design and Construc	
3. Policies related to the General I	Plan and Transportation	☐ Check here if additional sheets are attached	
PART VII LOBBYIST (CERTIFICATION		
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE 19 - January - 20/9 DATE		This 19 da By: Inocen NOTARY OR ANY O	DFFICIAL AUTHORIZED TO ADMINISTER OATHS
ev. 12/2017	Deadline: Januar	v 10 th of Each Y	98-487 * = S

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Doc. Date: JAN 1 9 2018 # Pages: 2 Name: Inocencio C. Ignacio First Circui Doc. Description: On Ferri	t
Signature Date NOTARY CERTIFICATION NOTARY CERTIFICATION 98-487 98-487	



PART I LOBBYIST

HONOLULU ETHICS COMMISSION

925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov
Website: http://www.honolulu.gov/ethics/

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JAN -8 P4:10

ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

NAME (Last) (First) (Middle)			TELEPHONE
Middlebrook, Matt				(415) 389-6800
MAILING ADDRESS (Stree	et)	•		FAX (415) 388-6874
c/o 2350 Kerner Blvd., Ste. 25	50			
				EMAIL airbnb@nmgovlaw.com
(City) San Rafael	San Rafael (State) CA		(Zip Code) 94901	
LOBBYIST FIRM/EMPLOY N/A	ER (Fill in only if	you are employed by a busine	ess entity that has been retained to lobby)	TELEPHONE
MAILING ADDRESS (No. a	and Street or	P.O Box)	=	FAX
V				EMAIL
(City)		(State)	n.	(Zip Code)
	77			
PART II ORGANIZA	ATION			
NAME OF ORGANIZATION	YOU LOB	BY FOR (Do not a	abbreviate)	TELEPHONE
Airbnb, Inc.				(415) 389-6800
MAILING ADDRESS (No. a	and Street or	P.O Box)		FAX (415) 388-6874
c/o 2350 Kerner Blvd., Ste. 25	0			
				EMAIL airbnb@nmgovlaw.com
(City) San Rafael	1	(State) CA		(Zip Code) 94901
PART III EXPENDIT	TURES, I	BY TYPE		
Political Contributions	Amount 0.00		Receptions, Meals, Food & Beverages	Amount 0.00
Preparation & Distribution of Lobbying Materials	Amount 0.00		Media Advertising	Amount 0.00
Entertainment & Events	Amount 0.00		Other Travel: \$2,000	
			TOTAL \$2,000	

Fees Programme Billion		Amount 0.00		
Compensation		Amount \$3,20	Amount \$3,200.00	
Contributions		Amount 0.00	ŭ	
Membership Fees		Amount 0.00	Amount 0.00	
☐ Check here if additional sheets are attached		□ n/a	□ n/a	
PART V DESCRIPTION	OF SUBJECTS	ON WHICH	YOU LOBBIED	
□Business & Economic Development	□Community Servi	ces	□Customer Services	
□Culture & Arts	□Housing		□Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism	
□Transportation ☑Other (indicate below):	⊠Zoning & Plannin	g	Bill No. (Year) Reso No. (Year) Admin. Rule No. Dept.	
Short-term rental regulations PART VI POLICY MAK INFLUENCE AND OUT		,	YOU SOUGHT TO	
	1. Resolution 17-163; Adoped			
1. Resolution 17-163; Adoped		4.		
1. Resolution 17-163; Adoped 2. Resolution 17-164; Adopted		5.		
Resolution 17-163; Adoped Resolution 17-164; Adopted	d	5.	e if additional sheets are attached	
1. Resolution 17-163; Adoped 2. Resolution 17-164; Adopted		5.	e if additional sheets are attached	

PLEASE SEE ATTATCHED

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See Attached Document (Notary to cross out	
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Signature of Bookmant Signar No. 1	Circulation of December Circulation Also Cife and
Signature of Document Signer No. 1	Signature of Document Signer No. 2 (if any)
	cate verifies only the identity of the individual who signed the the truthfulness, accuracy, or validity of that document.
State of California	Subscribed and sworn to (or affirmed) before me
County of SAN FRANCISCO	,
	on this 5tH day of JANUARY , 2018, Date Month Year
	(1) MATTHEW MIDDLE BROOK
	(1) INFIFTED INTOJUE BECOR
	(and (2)),
WILLIE CHAVEZ Notary Public - California	Name(s) of Signer(s)
San Francisco County Commission # 2174713 My Comm. Expires Dec 4, 2020	proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.
)	Λ,
	Signature MAY
	Signature of Notary Public
Seal	
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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
MIRIKITAM, RICHARD K.		(808) 548-4811
MAILING ADDRESS (Street)		FAX (808) 548-2975
680 IWILEI ROAD, SUITE 510		EMAIL
(City) HONOLULU	(State) HAWAII	(Zip Code) 96817
LOBBYIST FIRM/EMPLOYER (Fill in only if you are employed by a business entity that has been retained to lobby)		TELEPHONE
CASTLE & COOKE HOMES HAWAII, INC.		(808) 548-4188
MAILING ADDRESS (No. and Street or P.O Box) 680 IWILEI ROAD, SUITE 510		FAX (808) 548-2975
		EMAIL rmirikitani@castlecooke.com
(City) HONOLULU	(State) HAWAII	(Zip Code) 96817

PART II ORGANIZAT	ION	
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
CASTLE & COOKE HOMES HAWAII, INC. /		(808) 548-4811
MAILING ADDRESS (No. and Street or P.O Box) 680 IWILEI ROAD, SUITE 510		FAX (808) 548-2975
		EMAIL
(City) HONOLULU (State) HAWAII		(Zip Code)
HONOLULU	HAVVAII	96817

PART III EXPENDITURES, BY TYPE				
Political Contributions	Amount 0.00	Receptions, Meals, Food & Beverages	Amount 0.00	
Preparation & Distribution of Lobbying Materials	Amount 0.00	Media Advertising	Amount 0.00	
Entertainment & Events	Amount 0.00	Other 0.00		
		TOTAL 0.00		

Deadline: January 10th of Each Year NOTE: This is a public document

Rev. 12/2017

Compensation Contributions Membership Fees Check here if additional she PART V DESCRIPTION Business & Economic Development Culture & Arts Parks & Recreation	eets are attached			
Membership Fees Check here if additional she PART V DESCRIPTION Business & Economic Development Culture & Arts	OF SUBJECTS	Amount In n/a ON WHICH		
□ Check here if additional she PART V DESCRIPTION □ Business & Economic Development □ Culture & Arts	OF SUBJECTS			
PART V DESCRIPTION Business & Economic Development Culture & Arts	OF SUBJECTS	ON WHICH		
☐Business & Economic Development ☐Culture & Arts				
Development Culture & Arts	□Community Serv		YOU LOBBIED	
□Culture & Arts		rices	□Customer Services	
Derke & Postostion	⊠Housing		☐ Public Works, Infrastructure & Sustainability	
LI CAINS OF L'ECHEANOIL	□Public Health, Sa	afety & Welfare	□Tourism	
□Transportation	⊠Zoning & Planning		□ Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept	
□Other (indicate below):				
PART VI POLICY MAK		DECISIONS	YOU SOUGHT TO	
1. _{N/A}		4.	4.	
2.		5.		
3.	N N	☐ Check here if additional sheets are attached		
PART VII LOBBYIST C	ERTIFICATION			
I hereby certify that the foregoing and correct. LOBBYIST SIGNATURE JAN - 5 2018 DATE NOTARY CERTIFIC	g statements are true	This da		



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR COMMISSION

91.12.18

18 JAN -9 P3:01

ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
MIRIKITANI, RICHARD K.		(808) 548-4811
MAILING ADDRESS (Street)		FAX (808) 548-2975
680 IWILEI ROAD, SUITE 510		EMAIL
(City) HONOLULU	ty) HONOLULU (State) HAWAII	
LOBBYIST FIRM/EMPLOYER (Fill in only if)	rou are employed by a business entity that has been retained to lobby)	TELEPHONE
CASTLE & COOKE HOMES HAWAII, INC.		(808) 548-4188
MAILING ADDRESS (No. and Street or P.O Box) 680 IWILEI ROAD, SUITE 510		FAX (808) 548-2975
		EMAIL rmirikitani@castlecooke.com
(City) HONOLULU (State) HAWAII		(Zip Code) 96817

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE	
CASTLE & COOKE PROPERTIES, INC. /		(808) 548-4811	
MAILING ADDRESS (No. and Street or P.O Box) 680 IWILEI ROAD, SUITE 510		FAX (808) 548-2975	
		<u>iii</u>	
		EMAIL	
(City) HONOLULU (State) HAWAII		(Zip Code)	
TIOTACEGEO		96817	

PART III EXPENDITURES, BY TYPE				
Political Contributions	Amount 0.00	Receptions, Meals, Food & Beverages	Amount 0.00	
Preparation & Distribution of Lobbying Materials	Amount 0.00	Media Advertising	Amount 0.00	
Entertainment & Events	Amount 0.00	Other _{0.00}		
		TOTAL 0.00		

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING			
Fees 3 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 -		Amount	
Compensation		Amount	
Contributions		Amount	
Membership Fees		Amount	
☐ Check here if additional sheets	are attached	⊠ n/a	
PART V DESCRIPTION C	F SUBJECTS	ON WHICH	YOU LOBBIED
☐Business & Economic Development	□Community Servi	ces	☐ Customer Services
□Culture & Arts	⊠Housing		□ Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism
			☐Specific Legislation:
☐Transportation		g	Bill No(Year) Reso No(Year) Admin. Rule No Dept
□Other (indicate below):			
PART VI POLICY MAKING PROCESS DECISIONS YOU SOUGHT TO INFLUENCE AND OUTCOME			YOU SOUGHT TO
1. N/A		4.	
2.		5.	
3.		☐ Check here if additional sheets are attached	
PART VII LOBBYIST CER	RTIFICATION		
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE JAN - 5 2018 DATE NOTARY CERTIFICATION KYOKO PALOC LINE Hodgiel Street		Subscribed and sworn to before me This day of Manuary By KYOKO PAPOC, State of Hawaii & NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS My commission expires: June 14, 2020	
Rev. 12/2017 Notary Signature Rev. 12/2017 Rev. 12/2017 Notary Signature Rev. 12/2017 Notary Signature Notary Sig			



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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
MIRIKITANI, RICHARD K.		(808) 548-4811
MAILING ADDRESS (Street)		FAX (808) 548-2975
680 IWILEI ROAD, SUITE 510		EMAIL
(City) HONOLULU	(State) HAWAII	
LOBBYIST FIRM/EMPLOYER (Fill in only if you are employed by a business entity that has been retained to lobby)		TELEPHONE
CASTLE & COOKE HOMES HAWAII, INC.		(808) 548-4188
MAILING ADDRESS (No. and Street or P.O Box) 680 IWILEI ROAD, SUITE 510		FAX (808) 548-2975
		EMAIL rmirikitani@castlecooke.com
(City) HONOLULU (State) HAWAII		(Zip Code) 96817

PART II ORGANIZAT	TION	
NAME OF ORGANIZATION	NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)	
CASTLE & COOKE, INC.	CASTLE & COOKE, INC.	
MAILING ADDRESS (No. and Street or P.O Box)		FAX (808) 548-2975
680 IWILEI ROAD, SUITE 510		EMAIL
(City) HONOLULU (State) HAWAII		(Zip Code) 96817

PART III EXPENDITURES, BY TYPE				
Political Contributions	Amount 0.00	Receptions, Meals, Food & Beverages	Amount 0.00	
Preparation & Distribution of Lobbying Materials	Amount 0.00	Media Advertising	Amount 0.00	
Entertainment & Events	Amount 0.00	Other _{0.00}		
		TOTAL 0.00		

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING				
Fees q q q		Amount	Amount	
1		Amount		
Contributions		Amount		
Membership Fees		Amount		
☐ Check here if additional sh	eets are attached	⊠ n/a		
PART V DESCRIPTION	N OF SUBJECTS	ON WHICH	YOU LOBBIED	
☐Business & Economic Development	□Community Servi	ces	□ Customer Services	
□Culture & Arts	⊠Housing		□Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Sa	ifety & Welfare	□Tourism	
			☐ Specific Legislation:	
☐Transportation		g	Bill No(Year) Reso No(Year) Admin. Rule No Dept	
□Other (indicate below):				
PART VI POLICY MAK		ECISIONS	YOU SOUGHT TO	
1. _{N/A}		4.		
2.		5.		
3.		☐ Check here if additional sheets are attached		
PART VII LOBBYIST O	CERTIFICATION			
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE JAN - 5 2018 DATE NOTARY CERTIFICATION		This da		
Rev. 12/2017 Notary Signature Kyoko Patoc Doc. Description: Rev. 12/2017 Notary Signature Kyoko Patoc Doc. Description: Doc. Date: Rev. 12/2017 Notary Signature Rev. 12/2017 Notary Signature Rev. 12/2017				

Dec. Date: Notary Signature



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TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFIC**申D制意DULU**ETHICS COMMISSION
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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Morris, George A. "Red"		(808) 531-4551
MAILING ADDRESS (Street)		FAX (808) 533-4601
222 South Vineyard Street, Suite 401		(808) 533-4601
		EMAIL gamorrisinc@gmail.com
(City) Honolulu	(State) HI	(Zip Code) 96813
LOBBYIST FIRM/EMPLOYER (Fill in on	y if you are employed by a business entity that has been retained to lobby)	TELEPHONE
Capitol Consultants of Hawaii, LLP		(808) 531-4551
MAILING ADDRESS (No. and Street or P.O Box) 222 South Vineyard Street, Suite 401		FAX (808) 531-4551
		EMAIL gamorrisinc@gmail.com
(City) Honolulu	(State) HI	(Zip Code) 96813

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
American Chemistry Council		(916) 448-2581
MAILING ADDRESS (No. and Street or P.O Box) 1121 L Street, Suite 609		FAX (916) 442-2449
(City) Sacramento (State) CA		(Zip Code)
Sacramento	L CA	95814

Political Contributions	Amount	Receptions, Meals, Food & Beverages	Amount
Preparation & Distribution of Lobbying Materials	Amount	Media Advertising	Amount
Entertainment & Events	Amount	Other	
		TOTAL -NA-	

PART VII LOBBYIST CERTIFICATION	augali a	
I hereby certify that the foregoing statements are true and correct. LOBETIST SIGNATURE DATE	Subscribed and sworn to be This 10 ^{Hg} day of Sulfu Notary or any official author My commission expires: September 13, 2019	RIZED TO ADMINISTER OATHS NOTARY
		PUBLIC 1

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CERTIFICATION ON BACK

Doc. Date: #1 10 2018 # Pages 2
Notary Name: Valerie N. Tsutsumi First Circuit
Doc. Description Honolyly Ethics Commission
Annual Report
Talere O. Spellian 01/10/2018
Notary Signature / Date

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925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY ETHICS COMMISSION RECEIVED

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Morris, George "Red" A.		(808) 531-4551
MAILING ADDRESS (Street)		FAX (808) 533-4601
222 South Vineyard Street, Suite 401		(808) 555-4601
		EMAIL
		red.morris@808cch.com
(City) Honolulu	(State) _{HI}	(Zip Code)
Tionolaid		96813
LOBBYIST FIRM/EMPLOYER (Fill in only if you	ou are employed by a business entity that has been retained to lobby)	TELEPHONE
Capitol Consultants of Hawaii, LLP		(808) 531-4551
MAILING ADDRESS (No. and Street or	P.O Box)	FAX (808) 533-4601
222 South Vineyard Street, suite 401		(808) 533-4601
		EMAIL
		red.morris@808cch.com
(City) Honolulu	(State) HI	(Zip Code)
Tionoldia		96813

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
Charley's Taxi		(808) 233-3333
MAILING ADDRESS (No. and Street or P.O Box)		FAX
1451 S King Street, Suite 300		
		EMAIL dale@charleystaxi.com
^(City) Honolulu	(State)	(Zip Code)
Honoiulu		96813

PART III EXPENDITURES, BY TYPE					
Political Contributions	Amount	Receptions, Meals, Food & Beverages	Amount		
Preparation & Distribution of Lobbying Materials	Amount	Media Advertising	Amount		
Entertainment & Events	Amount	Other			
		TOTAL n/a			

TOU RECEIVED FOR	THE PURPOSE (NS AND MEMBERSHIP FEES	
Fees		Amount	Amount	
Compensation		Amount \$1,047.12		
Contributions		Amount		
Membership Fees		Amount		
☐ Check here if additional s	heets are attached	□ n/a		
PART V DESCRIPTIO	N OF SUBJECTS	ON WHICH	YOU LOBBIED	
□Business & Economic Development □Community Service		ices Customer Services		
□Culture & Arts	□Housing	_	□Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, S	afety & Welfare	□Tourism	
☑Transportation ☐Zoning & Planning		ng	□ Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept	
PART VI POLICY MAI INFLUENCE AND OU		DECISIONS	YOU SOUGHT TO	
¹ Bill 16-65 Re-referred		⁴ ·Bill 17-36 F	Passed Third Reading	
² Bill 16-55 passed			Passed Third Reading	
		^{5.} Bill 17-85 i	The state of the s	
	CERTIFICATION	^{5.} Bill 17-85 i	Re-referred	
² ·Bill 16-55 passed 3·Bill 16-56 Re-referred PART VII LOBBYIST I hereby certify that the foregoi and correct. DATE DATE		Subscribed and This Albarra da By: Curu	Re-referred e if additional sheets are attached and sworn to before me by of March 20[8 OFFICIAL AUTHORIZED TO ADMINISTER PATHS I. TSUTSUMI on expires:	



PART I I OBBYIST

HONOLULU ETHICS COMMISSION

925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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ANNUAL REPORT

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Lobbyist Annual Report (Type or Print Clearly)

174KT TEODDITOT	<u> </u>	
NAME (Last) (First) (Middle)		TELEPHONE
Nakasorie Dean T.		808-923-0407
MAILING ADDRESS (Street) 2270 Kalakaua Avenue Suite 1702		FAX 808-924-3843
		EMAIL DNakasone@hawaiilodging.org
(City) _{Honolulu}	(State) _{HI}	(Zip Code) 96815
LOBBYIST FIRM/EMPLOYER (Fill in only if you	ou are employed by a business entity that has been retained to lobby)	TELEPHONE
MAILING ADDRESS (No. and Street or	P.O Box)	FAX
		EMAIL
(City)	(State)	(Zip Code)
erece the state of the second		
PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBB	Y FOR (Do not abbreviate)	TELEPHONE
Hawaii Lodging & Tourism Association /		808-923-0407
MAILING ADDRESS (No. and Street or 2270 Kalakaua Avenue Suite 1702	P.O Box)	FAX ₈₀₈₋₉₂₄₋₃₈₄₃
		EMAIL info@hawaiilodging.org
(City) Honolulu	(State)	(Zip Code) 96815
PART III EXPENDITURES, B	Y TYPE	

Political Contributions	Amount	Receptions, Meals, Food & Beverages	Amount	
Preparation & Distribution of Lobbying Materials	Amount	Media Advertising	Amount	
Entertainment & Events Amount		Other		
<u> </u>	100	TOTAL \$0.00		

Rev. 12/2017

Deadline: January 10th of Each Year

NOTE: This is a public document

ees		Amount		
Compensation Lobbying const	itutes 2% of annual salary	Amount \$1,50	Amount \$1,500	
Contributions	ľ.	Amount		
Membership Fees		Amount		
☐ Check here if additional sheets are attached		□ n/a		
PART V DESCRIPTION	ON OF SUBJECTS	ON WHICH	YOU LOBBIED	
☑Business & Economic Development	LWICOMMUNITY Service		☑ Customer Services	
⊠ Culture & Arts	⊠Housing		☑Public Works, Infrastructure & Sustainability	
☑Parks & Recreation	⊠ Public Health, Sa	afety & Welfare	⊠Tourism	
			☐Specific Legislation:	
⊠ Transportation	☑Zoning & Plannir	ng	Bill No(Year) Reso No(Year) Admin. Rule No Dept	
PART VI POLICY MA		ECISIONS	YOU SOUGHT TO	
PART VI POLICY MA	JTCOME	DECISIONS 4.	YOU SOUGHT TO	
PART VI POLICY MAINFLUENCE AND OL	JTCOME		YOU SOUGHT TO	
PART VI POLICY MAINFLUENCE AND OU 1. Real Property Tax Rate for He 2.	JTCOME	4. 5.	YOU SOUGHT TO e if additional sheets are attached	
PART VI POLICY MAINFLUENCE AND OL 1. Real Property Tax Rate for He 2. 3.	JTCOME otels Reso 17-70	4. 5.		
2. 3. PART VII LOBBYIST I hereby certify that the forego	otels Reso 17-70 CERTIFICATION	4. 5.		
PART VI POLICY MAINFLUENCE AND OL 1. Real Property Tax Rate for He 2. 3. PART VII LOBBYIST	otels Reso 17-70 CERTIFICATION	4. 5. Check her Subscribed ar This 9th da By:	nd sworn to before me ay of January , 2018 . January , 2018 . OFFICIAL AUTHORIZED TO ADMINISTER OATHS OGAWA	



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR PITTINGE USE ONLY
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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST			<u> </u>	
NAME (Last) (First) (Middle)				TELEPHONE
Nellis Daplel X				808-621-3201
MAILING ADDRESS (Street	:)			FAX 808-621-7410
1116 Whitmore Avenue				EMAIL
				dan.nellis@dole.com
(City)		(State) HI		(Zip Code)
				96786
LOBBYIST FIRM/EMPLOYE	ER (Fill in anly if yo	u are employed by a busines	s entity that has been retained to lobby)	TELEPHONE
MAILING ADDRESS (No. ar	nd Street or	P.O Box)		FAX
				EMAIL
(City)	101 1019 - 210	(State)		(Zip Code)
PART II ORGANIZA				
NAME OF ORGANIZATION				TELEPHONE
Dole Food Company Hawaii a		·	ny, Inc.	808-621-3200
MAILING ADDRESS (No. ar	nd Street or	P.O Box)		FAX 808-621-7410
1116 Whitmore Avenue				EMAIL
				CIVICIE
(City) _{Wahiawa}		(State) HI		(Zip Code)
vvaniawa		П		96786
DADT III EVDENDIT	LIDES D	V TVDE		
PART III EXPENDIT		TITE	Decentions Made Food	Amount
Political Contributions	Amount		Receptions, Meals, Food & Beverages	Amount
Preparation & Distribution of Lobbying Materials	Amount		Media Advertising	Amount
Entertainment & Events	Amount		Other	
			TOTAL None	

YOU RECEIVED FOR	THE PURPOSE O	Amount		
Fees	et.			
Compensation		Amount \$50	0	
Contributions		Amount		
Membership Fees		Amount		
☐ Check here if additional she	eets are attached	□ n/a		
PART V DESCRIPTION	OF SUBJECTS	ON WHICH	YOU LOBBIED	
☐Business & Economic Development	I I IL OMMUNITY Service		□Customer Services	
□Culture & Arts	□Housing		□Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Safety & V		□Tourism	
			☑Specific Legislation:	
□Transportation	□Zoning & Plannin	g	Bill No. 59 1909 (Year) 2017 Reso No. (Year) Dept.	
Other (indicate below): I みし , North Shor PART VI POLICY MAK		ECISIONS	VOLUSOLIGHT TO	
INFLUENCE AND OUT	COME	ECISIONS	100 3000111 10	
1. Testimony in support Act and Exchange - by 2 WTL of AEN committees	et 5BN 309	4.		
2) WTL of AEN committees	i destruct by	5.		
3.		Check her	re if additional sheets are attached	
PART VII LOBBYIST C	ERTIFICATION			
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE		Subscribed and sworn to before me This Ath day of January 2018 By: Check of January 2018 NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS My commission expires: APR 0 5 2019		
Namel Melle LOBBYIST SIGNATURE _//9/2018		NOTARY OR ANY	MINIMINI.	

Doc. Date: JAN 0 9 2018 # Pages: 2
Name: Sheila S. Panergo | Growth

Notary Certification | Date | Date | Date |
Notary Certification | Date | Date | Date | Date |
Notary Certification | Date | Date

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925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Nip, Celeste		(808) 531-4551
MAILING ADDRESS (Street)		FAX (808) 533-4601
222 South Vineyard Street, Suite	401	(808) 533-4001
		EMAIL
		nipfire@hawaii.rr.com
(City) Honolulu	(State) HI	(Zip Code)
Honoiulu		96813
LOBBYIST FIRM/EMPLOYER	(Fill in only if you are employed by a business entity that has been retained to lobby)	TELEPHONE
Capitol Consultants of Hawaii, LLF		(808) 531-4551
MAILING ADDRESS (No. and	Street or P.O Box)	FAX (000) 501 4551
222 South Vineyard Street, Suite 4	101	(808) 531-4551
, , , , , , , , , , , , , , , , , , , ,		EMAIL
		nipfire@hawaii.rr.com
(City) Honolulu	(State) HI	(Zip Code)
Honolulu	П	96813

PART II ORGANIZAT	ION	
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
American Chemistry Council		(916) 448-2581
MAILING ADDRESS (No. and Street or P.O Box)		FAX (916) 442-2449
1121 L Street, Suite 609		
		EMAIL
		Tim_Shestek@americanchemisti
(City) Sacramento (State) CA		(Zip Code)
Sacramento	- CA	95814

PART III EXPENDIT			
Political Contributions	Amount	Receptions, Meals, Food & Beverages	Amount
Preparation & Distribution of Lobbying Materials	Amount	Media Advertising	Amount
Entertainment & Events	Amount	Other	
		TOTAL -NA-	

Fees		Amount	Amount	
Compensation		Amount \$4,25	50	
Contributions		Amount		
Membership Fees		Amount		
☐ Check here if additional sheets are attached		□ n/a		
PART V DESCRIPTIO	N OF SUBJECTS	ON WHICH	YOU LOBBIED	
☑Business & Economic Development	□Community Servi		□Customer Services	
□Culture & Arts	□Housing			
☑Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism	
***************************************			□Specific Legislation:	
□Transportation	□Zoning & Plannin	g	Bill No(Year) Reso No(Year) Admin. Rule No Dept	
☑Other (indicate below):				
		ECISIONS	YOU SOUGHT TO	
INFLUENCE AND OU		1	YOU SOUGHT TO 7-311 Introduced	
INFLUENCE AND OU 1. Bill 17-71 Deferred		4. Resolution 1		
1. Bill 17-71 Deferred 2. Bill 17-73 Deferred		4. Resolution 1 5. Resolution 1	7-311 Introduced	
	TCOME	4. Resolution 1 5. Resolution 1	7-311 Introduced 7-340 Introduced e if additional sheets are attached M. A.	
INFLUENCE AND OU 1. Bill 17-71 Deferred 2. Bill 17-73 Deferred 3. Bill 17-108 Introduced PART VII LOBBYIST (CERTIFICATION	4. Resolution 1 5. Resolution 1 □ Check here	7-311 Introduced 7-340 Introduced e if additional sheets are attached M. P. NOTARY PUBLIC Comm. No.	
1. Bill 17-71 Deferred 2. Bill 17-73 Deferred	CERTIFICATION	4. Resolution 1 5. Resolution 1 □ Check here	7-311 Introduced 7-340 Introduced e if additional sheets are attached M. P. NOTARY PUBLIC Comm. No. 03-564	
1. Bill 17-71 Deferred 2. Bill 17-73 Deferred 3. Bill 17-108 Introduced PART VII LOBBYIST (Interest)	CERTIFICATION ng statements are true	4. Resolution 1 5. Resolution 1 Check here Subscribed and This data	7-311 Introduced 7-340 Introduced e if additional sheets are attached M. P. PUBLIC Comm. No. 03-564 y of UNNUM NO. 03-564 Roch le M. Popace	
1. Bill 17-71 Deferred 2. Bill 17-73 Deferred 3. Bill 17-108 Introduced PART VII LOBBYIST (I hereby certify that the foregoinand correct.	CERTIFICATION ng statements are true	Subscribed and This Day da	7-311 Introduced 7-340 Introduced e if additional sheets are attached M. P. O. NOTARY PUBLIC Comm. No. 03-564 OFFICIAL AUTHORIZED TO ADMINISTER OATHS	
INFLUENCE AND OU 1. Bill 17-71 Deferred 2. Bill 17-73 Deferred 3. Bill 17-108 Introduced PART VII LOBBYIST OF The Proposition	CERTIFICATION Ing statements are true	4. Resolution 1 5. Resolution 1 Check here Subscribed and This data	7-311 Introduced 7-340 Introduced e if additional sheets are attached M. P. O. NOTARY PUBLIC Comm. No. 03-564 OFFICIAL AUTHORIZED TO ADMINISTER OATHS	
INFLUENCE AND OU 1. Bill 17-71 Deferred 2. Bill 17-73 Deferred 3. Bill 17-108 Introduced PART VII LOBBYIST OF The Proposition	CERTIFICATION Ing statements are true	Subscribed and This Day da	7-311 Introduced 7-340 Introduced e if additional sheets are attached M. P. PUBLIC Comm. No. 03-564 O 3-564 O 3-564 POFFICIAL AUTHORIZED TO ADMINISTER OATHS IN EXPIRES:	
INFLUENCE AND OU 1. Bill 17-71 Deferred 2. Bill 17-73 Deferred 3. Bill 17-108 Introduced PART VII LOBBYIST OF The Proposition	CERTIFICATION Ing statements are true	4. Resolution 1 5. Resolution 1 Check here Subscribed and the subsc	7-311 Introduced 7-340 Introduced e if additional sheets are attached M. P. NOTARY PUBLIC Comm. No. 03-564 OSFICIAL ANTHORIZED TO ADMINISTER OATHS POST DOC. Description: MNUL PUBLIC MNUL PUBLIC Roch le M. Popace OFFICIAL ANTHORIZED TO ADMINISTER OATHS POST DOC. Description: MNUL PUBLIC MNUL PUBLIC MNUL PUBLIC Comm. No. 03-564 COMM. No. 03-564 COMM. POPACE COMM. No. 03-564 COMM. POPACE COM	
INFLUENCE AND OU 1. Bill 17-71 Deferred 2. Bill 17-73 Deferred 3. Bill 17-108 Introduced PART VII LOBBYIST I hereby certify that the foregoin and correct. LOBBYIST SIGNATURE I/12/18 DATE ev. 12/2017	CERTIFICATION Ing statements are true	4. Resolution 1 5. Resolution 1 Check here Subscribed and the subsc	7-311 Introduced 7-340 Introduced e if additional sheets are attached M. P. PUBLIC Comm. No. 03-564 y of White M. Popace Pricial authorized to administer oaths in expires: Oc. Description: While M. Popace While M. Popace Page 16 M. Popace Comm. No. 03-564 Comm. No. 03-5	
INFLUENCE AND OU 1. Bill 17-71 Deferred 2. Bill 17-73 Deferred 3. Bill 17-108 Introduced PART VII LOBBYIST I hereby certify that the foregoinand correct. LOBBYIST SIGNATURE I/I 2/18 DATE EV. 12/2017 Committee O 3. Bill 17-73 Deferred I hereby certify that the foregoinand correct. CLUST PURE O 3. Bill 17-73 Deferred Committee O 3. Bill 17-108 Introduced	CERTIFICATION Ing statements are true	4. Resolution 1 5. Resolution 1 Check here Subscribed and the subsc	7-311 Introduced 7-340 Introduced e if additional sheets are attached M. P. NOTARY PUBLIC Comm. No. 03-564 OSFICIAL ANTHORIZED TO ADMINISTER OATHS POST DOC. Description: MNUL PUBLIC MNUL PUBLIC Roch le M. Popace OFFICIAL ANTHORIZED TO ADMINISTER OATHS POST DOC. Description: MNUL PUBLIC MNUL PUBLIC MNUL PUBLIC Comm. No. 03-564 COMM. No. 03-564 COMM. POPACE COMM. No. 03-564 COMM. POPACE COM	



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

	(Type of Time oldally)	
PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
ORMAN, LINDSAY E/		(808) 537-6100
MAILING ADDRESS (Street)		FAX (808) 537-5434
733 BISHOP STREET, SUITE 1900		(808) 557-5454
·		EMAIL
		lorman@stamlaw.com
(City)	(State) HAWAII	(Zip Code)
HONOLULU	HAVVAII	96813
LOBBYIST FIRM/EMPLOYER (Fill in only if yo	ou are employed by a business entity that has been retained to lobby)	TELEPHONE
STARN O'TOOLE MARCUS & FISHER		(808) 537-6100
MAILING ADDRESS (No. and Street or	P.O Box)	FAX (808) 537-5434
733 BISHOP STREET, SUITE 1900		(808) 537-5434
		EMAIL
(City)	(State)	(Zip Code)
(City) HONOLULU	(State) HAWAII	96813
DADT II ODGANIZATION		

PART II ORGANIZA	TION	
NAME OF ORGANIZATION	TELEPHONE	
PARK HOTELS & RESORTS	NC./	(703) 584-7979
MAILING ADDRESS (No. ar	FAX	
1600 TYSONS BOULEVARD,	10TH FLOOR	EMAIL
(City) MCLEAN	(State) VIRGINIA	(Zip Code) 22102

PART III EXPENDITURES, BY TYPE				
Political Contributions	Amount	Receptions, Meals, Food & Beverages	Amount	
Preparation & Distribution of Lobbying Materials	Amount	Media Advertising	Amount	
Entertainment & Events	Amount	Other		
		TOTAL 0		

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING				
Fees		Amount \$ 29,385.85		
Compensation		Amount		
Contributions		Amount		
Membership Fees		Amount		
☐ Check here if additional sheets	☐ Check here if additional sheets are attached			
PART V DESCRIPTION C	F SUBJECTS	ON WHICH	YOU LOBBIED	
☐Business & Economic Development	□Community Servi		□Customer Services	
□Culture & Arts	□Housing		□Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Sa	fety & Welfare	⊠Tourism	
			⊠Specific Legislation:	
□Transportation	⊠Zoning & Planning		Bill No. (Year) Reso No. 17-303 (Year) 2017 Admin. Rule No. Dept.	
□Other (indicate below):				
PART VI POLICY MAKING		ECISIONS	YOU SOUGHT TO	
1. INTRODUCTION & ADOPTION OF	RESO NO. 17-303	4.		
2.		5.		
3.	3.		☐ Check here if additional sheets are attached	
PART VII LOBBYIST CER	RTIFICATION			
I hereby certify that the foregoing statements are true and correct. I ORBEVIST SIGNATURE		Subscribed and sworn to before me SERNADATH this 10TH day of JANUARY 7 2018 ARY		
JANUARY 10, 2018 DATE		My commission expires:		

NOTARY CERTIFICATION STATEMENT Doc. Date: January 10, 2018 Undated at time of notarization Document Description: City and County of Honolulu Ethics Commission Lobbyist Annual Report for Lindsay E. Orman (Park Hotels & Resorts Inc.) No. of Pages: 3 Jurisdiction: First Judicial Circuit Honolulu, Hawaii August Comman (Park Hotels & Resorts Inc.) Document Description: City and County of Honolulu Ethics Commission Lobbyist Annual Report for Lindsay E. Orman (Park Hotels & Resorts Inc.) No. of Pages: 3 Jurisdiction: First Judicial Circuit Honolulu, Hawaii August Comman (Park Hotels & Resorts Inc.) Document Description: City and County of Honolulu Ethics Commission Lobbyist Annual Report for Lindsay E. Orman (Park Hotels & Resorts Inc.) No. of Pages: 3 Jurisdiction: First Judicial Circuit Honolulu, Hawaii August Comman (Park Hotels & Resorts Inc.) Commission Lobbyist Annual Report for Lindsay E. Orman (Park Hotels & Resorts Inc.) No. of Pages: 3 Jurisdiction: First Judicial Circuit Honolulu, Hawaii August Comman (Park Hotels & Resorts Inc.) Commission Lobbyist Annual Report for Lindsay E. Orman (Park Hotels & Resorts Inc.) No. of Pages: 3 Jurisdiction: First Judicial Circuit Honolulu, Hawaii August Comman (Park Hotels & Resorts Inc.) Commission Lobbyist Annual Report for Lindsay E. Orman (Park Hotels & Resorts Inc.) No. of Pages: 3 Jurisdiction: First Judicial Circuit Honolulu, Hawaii August Comman (Park Hotels & Resorts Inc.)

(Official Stamp or Seal)

Bernadette A. Lee

Printed Name of Notary



HONOLULU ETHICS COMMISSION 925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email ethics@honolulu.gov
Website: http://www.honolulu.gov/ethics/

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST				
NAME (Last) (First) (Middle)			TELEPHONE	
OSHIMA, Alan M.			808-543-4800	
MAILING ADDRESS (Street)				FAX 808-203-1500
P. O. Box 2750				
				EMAIL
(Cibr)	/O4-4-1			alan.oshima@hawaiianelectric.co
(City) Honolulu	(State) HI			(Zip Code) 96840
LOBBYIST FIRM/EMPLOY	ER (Fill in only if you	u are employed by a busines	s entity that has been retained to lobby)	TELEPHONE
			,	
MAILING ADDRESS (No. a	and Street or	P.O Box)		FAX
		·		
				EMAIL
(City)		(State)		(Zin Codo)
(City)		(State)		(Zip Code)
PART II ORGANIZA	ATION			
NAME OF ORGANIZATION	YOU LOBB	Y FOR (Do not a	bbreviate)	TELEPHONE
Hawaiian Electric Company, I	nc. /			
MAILING ADDRESS (No. 8	and Street or	P.O Box)		FAX
P. O. Box 2750				
,				EMAIL
(City)		(State)		(Zip Code)
(City) Honolulu	,	(State)		96840
		· · ·		
PART III EXPENDIT	TURES, B	Y TYPE		
Political Contributions	Amount		Receptions, Meals, Food	Amount
WALLS INC.	0		& Beverages	0
Preparation & Distribution of Lobbying Materials	Amount		Media Advertising	Amount
Entertainment & Events	nts Amount C		Other	
	0			
085-61			TOTAL 0	
HAH RO STERVING	٠		<u> </u>	

Deadline: January 10th of Each Year NOTE: This is a public document

The patrick My Crans- Hr , a ON DAY OF THE PARTY OF THE PART

mmunity Servi	Amount Amount Amount In n/a ON WHICH	
JBJECTS	Amount ⊠ n/a	
JBJECTS	⊠ n/a	
JBJECTS		
mmunity Servi	ON WHICH	
		YOU LOBBIED
	ices	□Customer Services
ousing		□Public Works, Infrastructure & Sustainability
blic Health, Sa	afety & Welfare	□Tourism
☐Zoning & Planning		□Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept
OCESS D	ECISIONS	YOU SOUGHT TO
	4.	
	5,	
	☐ Check here if additional sheets are attached	
CATION		
nts are true	This 4th da By: NOTARY OR ANY My commission 11/3/	Doc. Date: 1/4/10 WPag Name: LOGITO TKEI Doc. Description: HONOININE EXP
		My coṃmissip



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Oshiro Paul T.		(808) 525-6640
MAILING ADDRESS (Street)		FAX (909) 525 6677
P. O. Box 3440		(808) 525-6677
		EMAIL poshiro@abhi.com
(City) Honolulu	(State) Hawaii	(Zip Code) 96801
LOBBYIST FIRM/EMPLOYER (Fill in only if you	u are employed by a business entity that has been retained to lobby)	TELEPHONE
MAILING ADDRESS (No. and Street or I	P.O Box)	FAX
		EMAIL
(City)	(State)	(Zip Code)

PART II ORGANIZA	ATION	
NAME OF ORGANIZATION	TELEPHONE	
Alexander & Baldwin	(808) 525-6640	
MAILING ADDRESS (No. a	FAX (808) 525-6677	
P. O. Box 3440		(808) 525-6677
	EMAIL	
		poshiro@abhi.com
(City) Honolulu	(State) Hawaii	(Zip Code)
Tioriolaid	i iawali	96801

PART III EXPENDITURES, BY TYPE				
Political Contributions	Amount \$0.00	Receptions, Meals, Food & Beverages	Amount \$0.00	
Preparation & Distribution of Lobbying Materials	Amount \$0.00	Media Advertising	Amount \$0.00	
Entertainment & Events	Amount \$0.00	Other None		
		TOTAL \$0.00		

PART IV FEES, COMPEN YOU RECEIVED FOR TH	NSATION, CON IE PURPOSE O	TRIBUTION F LOBBYII	NS AND MEMBERSHIP FEES	
Fees		Amount \$0.00		
Compensation		Amount \$1,59	3	
Contributions		Amount \$0.00		
Membership Fees		Amount \$0.00		
☐ Check here if additional sheets	s are attached	□ n/a	5	
PART V DESCRIPTION C	OF SUBJECTS	ON WHICH	YOU LOBBIED	
☐Business & Economic Development	□Community Servi	ces	□Customer Services	
□Culture & Arts	⊠Housing		□Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism	
			□Specific Legislation:	
☐Transportation ☑Zoning & Planning		3	Bill No. <u>58 (Year) 2017</u> Reso No(Year) Admin. Rule No Dept	
□Other (indicate below):				
PART VI POLICY MAKING INFLUENCE AND OUTCO		ECISIONS	YOU SOUGHT TO	
1. Important Agricultural Lands County	Mapping (Pending)	4.		
2. Affordable Housing Policy (Pending)		5.		
3.		☐ Check here if additional sheets are attached		
PART VII LOBBYIST CER	RTIFICATION			
I hereby certify that the foregoing statements are true and correct.		Subscribed and sworn to before me This 27th day of Olumber, 20th		
LOBBYIST SIGNATURE		NOTARY OF ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS		
December 27, 2017 DATE		My commission expires: APR 17 2021		
Rev. 12/2017	Deadline: January NOTE: This is a p	10 th of Each Ye	Doc. Date: Undated Notary Name: Cheryl A. One Programs Boc. Description: Annual Reports Clin CA-Communication (1873)	

Rev. 12/2017

Notary Signature NOTARY CERTIF



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ANNUAL REPORT

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Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST				
NAME (Last) (First) (Middle)			TELEPHONE
Pavlicek, Melissa /				808-447-1840
MAILING ADDRESS (Street	et)			FAX
1099 Alakea Street Suite 2530)			
				EMAIL mpavlicek@hawaiipublicpolicy.co
(City) Honolulu (State) HI			(Zip Code) 96813	
LOBBYIST FIRM/EMPLOY	ER (Fill in only if y	ou are employed by a busine	ss entity that has been retained to lobby)	TELEPHONE
Hawaii Public Policy Advocate	s, LLC			808-447-1840
MAILING ADDRESS (No. a	nd Street or	P.O Box)		FAX
1099 Alakea Street Suite 2530)			EMAIL
(City) Honolulu	Honolulu (State)			(Zip Code) 96813
PART II ORGANIZA	TION			
NAME OF ORGANIZATION	YOU LOBE	Y FOR (Do not a	bbreviate)	TELEPHONE
Safeway /			T	
MAILING ADDRESS (No. a	nd Street or	P.O Box)		FAX
5918 Stoneridge Mall Road				
				EMAIL
(City) Pleasanton (State) CA			(Zip Code) 94588	
PART III EXPENDIT	URES. E	BY TYPE		
Political Contributions	Amount		Receptions, Meals, Food & Beverages	Amount
Preparation & Distribution of Lobbying Materials	Amount	Media Advertising		Amount
Entertainment & Events	Amount		Other	
			TOTAL HONE 01/12	18

		IS AND MEMBERSHIP FEES
Amo	Amount \$3,000	
Amo	ount	
Amo	ount	
Amo	ount	
ched □ n	/a	
SJECTS ON	WHICH	YOU LOBBIED
nunity Services		□Customer Services
ng		☑Public Works, Infrastructure & Sustainability
Health, Safety &	Welfare	□Tourism
□Zoning & Planning		□Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept
CESS DECIS	SIONS	YOU SOUGHT TO
4.		
5.	5.	
□с	☐ Check here if additional sheets are attached	
ATION		
are true Sub	Subscribed and sworn to before me	
By:	This Am day of January, 2018 By: NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS My commission expires: 91.8.2018	
	Amount Am	Amount \$3,00 Amount Amount Amount Ched

Doc Date: 1/9/2018 #Pages: 2
Name: Charlotte Nakayana First Circuit
Doc. Description: Annual Teport

3ignature

1/9/2018 Date

NOTARY CERTIFICATION



PART I LOBBYIST

HONOLULU ETHICS COMMISSION

925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

NAME (Last) (First) (Middle	TELEPHONE			
Pavlicek, Melissa /		808-447-1840		
MAILING ADDRESS (Street	et)			FAX
1099 Alakea Street Suite 2530)			
				EMAIL.
(City)		(04-4-)		mpavlicek@hawaiipublicpolicy.cd
(City) Honolulu (State) HI			(Zip Code) 96813	
LOBBYIST FIRM/EMPLOY	ER (Fill in only if y	ou are employed by a busine	ess entity that has been retained to lobby)	TELEPHONE
Hawaii Public Policy Advocate			,,	808-447-1840
MAILING ADDRESS (No. a	nd Street or	P.O Box)		FAX
1099 Alakea Street Suite 2530			•	
				EMAIL
(City) Honolulu		(State)		(Zip Code)
Honolulu		, 'HI	ă .	96813
PART II ORGANIZA				
NAME OF ORGANIZATION	YOU LOBE	BY FOR (Do not a	abbreviate)	TELEPHONE
Schnitzer Steel Hawaii Corp				503-708-9714
MAILING ADDRESS (No. a	nd Street or	P.O Box)		FAX
91-056 Hanua Street				
· v				EMAIL
(City) Kapolei		(State) HI		(Zip Code)
Kapolel		HI		96707
PART III EXPENDIT	TIRES P	Y TYPE		
Political Contributions	Amount	77 111 2	Receptions, Meals, Food	Amount
- Contical Continuations	Amount		& Beverages	Amount
Preparation & Distribution of Lobbying Materials	Amount		Media Advertising	Amount
Entertainment & Events	Amount		Other	
			TOTAL NONE to	1/12/18
		(7)		

PART IV FEES, COMPEN YOU RECEIVED FOR TH			NS AND MEMBERSHIP FEES
Fees		Amount \$6,500	
Compensation		Amount	
Contributions		Amount	
Membership Fees		Amount	
☐ Check here if additional sheets	are attached	□ n/a	
PART V DESCRIPTION C	F SUBJECTS	ON WHICH	YOU LOBBIED
□Business & Economic Development	□Community Servi		□Customer Services
□Culture & Arts	□Housing		☑Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism
□Transportation	□Zoning & Płanning		□Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept
□Other (indicate below):			
PART VI POLICY MAKING		ECISIONS	YOU SOUGHT TO
1. Support for county recycling program		4.	
2.		5.	
3.		☐ Check here if additional sheets are attached	
PART VII LOBBYIST CER	RTIFICATION		
I hereby certify that the foregoing statements are true and correct. Autice		Subscribed and sworn to before me This 9th day of January, 2018 By:	
LOBBYIST SIGNATURE L 9 1 8 DATE		My commission expires:	

Doc Date:_	1/9	2018	_ #	Pages:_	2
Name: Ch	arlott	e Nakay	Lane?		
Doc. Descri	ption:	Annu	al	Kep	*-

Signature

NOTARY CERTIFICATION



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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

	(Typo of Trink oldarly)	
PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Peters, Shane Hoaliku		(808) 421-9879
MAILING ADDRESS (Street)		FAX
3655 Kawelolani Place		EMAIL shane@peters-comm.com
(City) Honolulu	(State) Hawaii	(Zip Code) 96816
LOBBYIST FIRM/EMPLOYER (Fill in only	If you are employed by a business entity that has been retained to lobby)	TELEPHONE
Peters Communications, LLC		(808) 421-9879
MAILING ADDRESS (No. and Street	or P.O Box)	FAX
3655 Kawelolani Place		EMAIL shane@peters-comm.com
(City) Honolulu	(State) Hawaii	(Zip Code) 96816
PART II ORGANIZATION		

PART II ORGANIZA	TION	
NAME OF ORGANIZATION	YOU LOBBY FOR (Do not abbreviate)	TELEPHONE
Airbnb, Inc.		(415) 389-6800
MAILING ADDRESS (No. ar	FAX	
c/o Joel Aurora NIELSEN MERKSAMER PARI 2350 Kerner Blvd., Ste. 250	RINELLO GROSS & LEONI LLP	EMAIL jaurora@nmgovlaw.com
(City) San Rafael	(State) Hawaii	(Zip Code) 96816

PART III EXPENDIT	TURES, BY TYP	PE	
Political Contributions	Amount	Receptions, Meals, Food & Beverages	Amount
Preparation & Distribution of Lobbying Materials	Amount	Media Advertising	Amount
Entertainment & Events	Amount	Other	
		TOTAL -NA-	

ees		Amount	
Compensation	81	Amount	
Contributions		Amount	
Membership Fees		Amount	
☐ Check here if additional she	eets are attached	■ n/a	
PART V DESCRIPTION	N OF SUBJECTS	ON WHICH	YOU LOBBIED
☐Business & Economic Development	□Community Serv	/ices	□Customer Services
□Culture & Arts	□Housing		□Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Sa	afety & Welfare	™ Tourism
			■Specific Legislation:
□Transportation ■Zoning & Plannin		Bill No. (Year) Reso No. (see Other)(Year)2017 Admin. Rule No. Dept.	
☑Other (indicate below): Resos 17-52, 17-163, 17-164, 17-30	01		
PART VI POLICY MAK		DECISIONS	YOU SOUGHT TO
1. short-term rental and land use po	olicles, ONGOING	^{4.} Reso 17-164 Passed	
2. Reso 17-52 Passed		5. Reso 17-301 Passed	
3. Reso 17-163 Passed		☐ Check here if additional sheets are attached	
PART VII LOBBYIST C	ERTIFICATION		
I hereby certify that the foregoing statements are true and correct. LOBBYIST/SIGNATURE DATE		This da	A SWORN to before me By of JAN - 9 2018 FOR THE PUBLIC FIRST JUDICIAL CIRCUIT

Deadline: January 10th of Each Year
NOTE: This is a public document

Notary Name PAULAJ. KANESHIRO First Circuit
Doc. Description Chinual Report

No. 95

Date

Doc. Date: JAN - 9 2018

Notary Name PAULAJ. KANESHIRO First Circuit
Doc. Description Chinual Report

No. 95

No. 95

No. 95

No. 95

No. 95

Date

Doc. Date: JAN - 9 2018

Notary Signature

Doc. Date: JAN - 9 2018



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Peters, Shane, Hoaliku		(808) 421-9879
MAILING ADDRESS (Street)		FAX
3655 Kawelolani Place		EMAIL shane@peters-comm.com
(City) Honolulu	(State) Hawaii	(Zip Code) 96816
LOBBYIST FIRM/EMPLOYER (FI	in only if you are employed by a business entity that has been retained to lobby)	TELEPHONE
Peters Communications, LLC		(808) 421-9879
MAILING ADDRESS (No. and St	reet or P.O Box)	FAX
3655 Kawelolani Place		EMAIL shane@peters-comm.com
(City) Honolulu	(State) Hawaii	(Zip Code) 96816

PART II ORGANIZAT	ION		
NAME OF ORGANIZATION Y	OU LOBBY FOR (Do not abbreviate)	TELEPHONE	
American Chemistry Council		(916) 448-2581	
MAILING ADDRESS (No. and Street or P.O Box)		FAX	
1121 L Street, Suite 609		EMAIL IIndsay_stovall@americanchemistry.com	
(City) Sacramento	(State) California	(Zip Code) 95814	

PART III EXPENDIT	URES, BY TYPE			
Political Contributions	Amount	Receptions, Meals, Food & Beverages	Amount	
Preparation & Distribution of Lobbying Materials	Amount	Media Advertising	Amount	
Entertainment & Events	Amount	Other		
		TOTAL -NA-		

Fees		Amount		
Compensation		Amount		
Contributions		Amount		
Membership Fees		Amount		
☐ Check here if additional sheets are attached		™ n/a		
PART V DESCRIPTION	OF SUBJECTS	ON WHICH	YOU LOBBIED	
□Business & Economic Development	□Community Servi	ices	□Customer Services	
□Culture & Arts	□Housing	· · · · · · · · · · · · · · · · · · ·	圖Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Sa	ifety & Welfare	□Tourism	
□Transportation	□Zoning & Planning		□Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept	
PART VI POLICY MAKI INFLUENCE AND OUT 1. Bill 17-108 Introduced		4.	YOU SOUGHT TO	
2. Bill 17-73 deferred		5.		
3. Bill 17-71 deferred		☐ Check here if additional sheets are attached		
PART VII LOBBYIST CE	ERTIFICATION		E T PU	
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE DATE		Subscribed and sworn to before me This day of JAN - 9 2018 By: A JAN - 9 2018 NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS PAULA J. KANESHIRO My commission expires NOTARY PUBLIC FIRST JUDICIAL CIRC STATE OF HAWAII COMMISSION EXPIRES 2/16/19		
ev. 12/2017 NOTARY PUBLIC No. 99-8	Deadline: Januar O NOTE: This is a	y 10 th of Each Ye public documen	t Doc Date: JAN - 9 2018 # Pages	