

x.

HONOLULU ETHICS COMMISSION

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

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

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ETHICS COMMISSION	
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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		<u>.</u>
NAME (Last) (First) (Middle)		TELEPHONE
Rabago, Reena		(808) 531-4551
MAILING ADDRESS (Street)		FAX (808) 533-4601
222 South Vineyard Street, Suite 401		EMAIL rrabago@808cch.com
(City) Honolulu	(State) _{HI}	(Zip Code) 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, LLP		(808) 531-4551
MAILING ADDRESS (No. and Street or	P.O Box)	FAX (808) 531-4551
222 South Vineyard Street, Suite 401		
		EMAIL rrabago@808cch.com
(City) Honolulu	(State) _{HI}	(Zip Code) 96813

PART II ORGANIZATION			
NAME OF ORGANIZATION	YOU LOBBY FOR (Do not abbreviate)	TELEPHONE	
Kamehameha Schools		(808) 523-6348	
MAILING ADDRESS (No. and Street or P.O Box)		FAX	
567 S. King Street, Suite 400		EMAIL kaburges@ksbe.edu	
(City) Honolulu	(State) HI	(Zip Code) 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 -NA-		

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

Fees	Amount
Compensation	Amount \$3,821.75
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 Services	□Customer Services	
□Culture & Arts	Housing	Public Works, Infrastructure & Sustainability	
Parks & Recreation	□Public Health, Safety & Welfare	□Tourism	
□Transportation	⊠Zoning & Planning	ISpecific Legislation: Bill No. <u>See Below</u> (Year) Reso No(Year) Admin. Rule No Dept	
Other (indicate below):			

PART VI POLICY MAKING PROCESS DECISIONS YOU SOUGHT TO INFLUENCE AND OUTCOME

^{1.} Bill 17-58 Passed second reading	4.
2. Bill 17-59 Passed second reading	5.
3.	□ Check here if additional sheets are attached

PART VII LOBBYIST CERTIFICATION	
I hereby certify that the foregoing statements are true and correct. Reina Raha (Morecum Raha) LOBBYIST SIGNATURE 01-12-2010 DATE	Subscribed and sworn to before me This Aday of Subscribed and sworn to before me This Aday of Subscribed and sworn to before me MUTSUKO CARAULIA NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS: 09-18 My commission explosing Public, First Judicial Circuit State of Hawaii My commission expires: April 5, 2021
Rev. 12/2017 Deadline: Januar NOTE: This is a	Ty 10 th Of Each Year of Name: Mutrule (A multure 194 Circuit a public document Doc. Description: Annul Pupurt 09-98 Signature NOTARY CERTIFICATION



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

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ETH	ICS COMM		
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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle) Rolf, David Henry		TELEPHONE 808 593-1533
MAILING ADDRESS (Street) 1100 Alakea St. Suite 2601		FAX 808 593-0569
		EMAIL drolf@hawaiidealer.com
(City) _{Honolulu}	(Zip Code) 96813	
LOBBYIST FIRM/EMPLOYER (Fill in only if you are employed by a business entilly that has been retained to lobby) Rolf Advertising		TELEPHONE 808 593-1533
MAILING ADDRESS (No. and Street or P.O Box) 1100 Alakea St. Suite 2601		FAX 808 593-0569
		EMAIL drolf@hawaiidealer.com
(City) _{Honolulu}	(State) _{Hawaii}	(Zip Code) 96813

PART II ORGANIZ		TELEPHONE
	N YOU LOBBY FOR (Do not abbreviate)	
Hawaii Automobile Dealers As	808 593-0031	
MAILING ADDRESS (No. and Street or P.O Box) 1100 Alakea St. Suite 2601		FAX 808 593-0569
		EMAIL
(City) _{Honolulu}	(State) _{Hawaii}	(Zip Code) 96813

PART III EXPENDITURES, BY TYPE				
Political Contributions	Amount \$1,700	Receptions, Meals, Food & Beverages	Amount \$0	
Preparation & Distribution of Lobbying Materials	Amount under \$20	Media Advertising	Amount \$0	
Entertainment & Events	Amount \$0	Other		
		TOTAL \$1,720		

Rev. 12/2017

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

Fees	Amount \$
Compensation total lobbying fee for the year	Amount \$27,252
Contributions Total dealer contributions to HADA PAC in '17	Amount \$11,000
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 Services	Customer Services
□Culture & Arts	□Housing	□Public Works, Infrastructure & Sustainability
□ Parks & Recreation	□Public Health, Safety & Welfare	□Tourism
Intersection Intersection	□Zoning & Planning	□ Specific Legislation: Bill No. Bill 64 (Year)2016 Reso No. (Year) Admin. Rule No. Dept.
□Other (indicate below):		

PART VI POLICY MAKING PROCESS DECISIONS YOU SOUGHT TO INFLUENCE AND OUTCOME

1. helping to create online vehicle registration for used cars Bill 64 (2016) - Became Jaw 2 Dassed	4.	
2.	5.	HHHHHHHHH
3.	□ Check here if additional sheets a	re attached (AR)
		= 41 09-10 C
PART VII LOBBYIST CERTIFICATION		E O MUBL
I hereby certify that the foregoing statements are type	Subscribed and sworn to before me	THE OF Y

I nereby certify that the foregoing s	statements are time	Subscribed and sw	orn to before me	summer and the
LOBBYIST SIGNATURE	Rolf	This 26th day of	Vecde_	2018
X 2-20-18 Contaces DATE sent on old report to 1-10-18 devol me	form prior	NOTARY OR ANY OFFICIA A////som My commission exp 05/31/20	AL AUTHORIZED TO ADMINIS //CCOR, State of 1 Dires: Circu D2]	STER OATHS FIRS + Hervar, Firs + Lit, No bay Public
Rev. 12/2017	Deadline, January NOTE: This is a	10" of Each Year	Notary Name: Allison	18 # Pages: 2 Ikeda First Circuit abby 158 Anduel
	TEOF	HIMMAN	Notary Signature NOTARY CE	AJ/26/18 Date Date

NOTARY CERTIFICATION



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

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ANNUAL REPORT

PART I LOBBYIST		
NAMĘ (Last) (First) (Middle)		TELEPHONE
Sabas, Jennifer G 🗸		808292934
MAILING ADDRESS (Street)		FAX
725 Kapiolani Blvd, Suite C400		EMAIL jennifer@kaimanahila.com
(City) Honolulu	(State) _{HI}	(Zip Code) 96813
LOBBYIST FIRM/EMPLOYER (Fill in only if you are employed by a business entity that has been retained to lobby)		TELEPHONE
Kaimana Hila		808-292-9234
MAILING ADDRESS (No. and Street or	P.O Box)	FAX
725 Kapiolani Blvd, Suite C400		EMAIL jennifer@kaimanahila.com
(City) Honolulu (State) HI		(Zip Code) 96813

PART II ORGANIZ	ATION	المستحد والمترفلين وسير
NAME OF ORGANIZATIO	N YOU LOBBY FOR (Do not abbreviate)	TELEPHONE
Move Oahu Forward 🦯		808-292-9234
MAILING ADDRESS (No.	and Street or P.O Box)	FAX
PO Box 1329		EMAIL info@moveoahuforward.org
(City) Honolulu	(State) _{HI}	(Zip Code) 96807

PART III EXPENDIT	URES, BY TYPE		
Political Contributions	Amount \$2,250	Receptions, Meals, Food & Beverages	Amount none
Preparation & Distribution of Lobbying Materials	Amount none	Media Advertising	Amount none
Entertainment & Events	Amount none	Other	
		TOTAL \$2,250	

Fees	Amount
Compensation	Amount \$12,000
Contributions	Amount
Membership Fees	Amount
□ Check here if additional sheets are attached	□ n/a

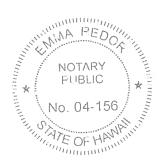
PART V DESCRIPTION OF SUBJECTS ON WHICH YOU LOBBIED		
□Business & Economic Development	□Community Services	□Customer Services
□Culture & Arts	□Housing	□Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Safety & Welfare	□Tourism
⊠Transportation	□Zoning & Planning	□ Specific Legislation: 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.} funding support for the rail project	4.
2.	5.
3.	□ Check here if additional sheets are attached

PART VII LOBBYIST CERTIFICATION

I hereby certify that the foreg and correct. LOBBYIST SIGNATURE 1 17 2019 DATE	hoing statements are true	Subscribed and sworn to before me This <u>11</u> ⁴⁴ day of <u>Jamury</u> , <u>2018</u> By: <u>Emma</u> <u>Reduct</u> NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS My commission expires: <u>NOTARY</u> FUBLIC *
Rev. 12/2017	Deadline: January NOTE: This is a	



Doc. Date: $1/17/2018$ # Faces 2
Notary Name: Emma Redor First Circuit
Lobbylist Honolulu Ethics Comm. Gave 1/17/2018
Notary Signature



HONOLULU ETHICS COMMISSION

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

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ANNUAL REPORT

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Sabas, John R.		(808) 523-2500
MAILING ADDRESS (Street) 1001 Bishop Street, Suite 2100		FAX (808) 523-0842
		EMAIL jsabas@carlsmith.com
(City) Honolulu	(State) _{HI}	(Zip Code) 96813
LOBBYIST FIRM/EMPLOYER (Fill in only if yo	u are employed by a business entity that has been retained to lobby)	TELEPHONE
Carlsmith Ball LLP		(808) 523-2500
MAILING ADDRESS (No. and Street or 1001 Bishop Street, Suite 2100	P.O Box)	FAX (808) 523-0842
		EMAIL
(City) Honolulu	(State) _{HI}	(Zip Code) 96813

PART II ORGANIZA	TION	
NAME OF ORGANIZATION	YOU LOBBY FOR (Do not abbreviate)	TELEPHONE
Carlsmith Ball LLP		(808) 523-2500
MAILING ADDRESS (No. and Street or P.O Box) 1001 Bishop Street, Suite 2100		FAX (808) 523-0842
		EMAIL
(City) Honolulu	(State) _{HI}	(Zip Code) 96813

PART III EXPENDI	FURES, 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
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 Services	Customer Services
□Culture & Arts	⊠Housing	Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Safety & Welfare	□ Tourism
□ Transportation	⊠Zoning & Planning	Specific Legislation: 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. STATE OF HAWAII	5.
) SS. CITY AND COUNTY OF HONOLULU	
	Check here if additional sheets are attached

PART VII LOBBYIST CERTIFICATION	
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE March 15, 2018 DATE	Subscribed and sworn to before me This <u>15th</u> day of <u>March</u> , <u>2018</u> By: <u>Sep 0.5.2018</u> Notary or any official authorized to administer oaths Rodney S. Nagasako My commission expires: <u>SEP 0.5.2018</u>
	y 10 th of Each Year public document

NOTARY CERTIFICATE ON NEXT PAGE

NOTARY PUBLIC CERTI Rodney S. Nagasako 157 Doc. Description: ADDUAL	Judicial Circuit
No. of Pages: Date of	Doc. MAR 1 5 2018
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HONOLULU ETHICS COMMISSION

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ANNUAL REPORT

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Sabas, John R.		808.523.2500
MAILING ADDRESS (Street) 1001 Bishop Street, Suite 2100		FAX 808.523.0842
		EMAIL
		jsabas@carlsmith.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
Carlsmith Ball LLP		808.523.2500
MAILING ADDRESS (No. and Street or I	P.O Box)	FAX 808.523.0845
1001 Bishop Street, Suite 2100		000.020.0040
		EMAIL
(City) Honolulu	(State) HI	(Zip Code)
nonolulu	1 11	96813

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOB	BY FOR (Do not abbreviate)	TELEPHONE
GGP Ala Moana L.L.C. (General Growth P	roperties, Inc.)	
MAILING ADDRESS (No. and Street o 110 N. Wacker Drive	r P.O Box)	FAX
		EMAIL
(City) Chicago	(State) IL	(Zip Code) 60606

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	

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 Services	□Customer Services
Culture & Arts	图Housing	Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Safety & Welfare	□Tourism
□ Transportation	⊠Zoning & Planning	Specific Legislation: 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. NONE to avalue	4.
2.	5.
3.	STATER FHAWAU ditional sheets are attached
	CITY AND COUNTY OF HONOLULU)

PART VII LOBBYIST CERTIFICATION

I hereby certify that the foregoing statements are true and correct.

Acc.)

Subscribed and sworn to before me This 911day of JANUARY 2018

By: Icely S. M Ku NOTABY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER MAINING Rodney S. Nagasako

My commission expiresSEP 0 5 201

Rev. 12/2017

DATE

LOBBYIST SIGNATURE

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

NOTARY CERTIFICATE ON NEXT PAGE

NOTARY PUBLIC CERTIFICATION Rodney S. Nagasako 15 Judicial Circuit Doc. Description: ANDUAL REPORT LOIDYIST ANDUAL REPORT No. of Pages: 3 Date of Doc. JAN U 9 ZU18 ,5. JAN 0 9 2018 5 c Notary Signature Date ι NAGASAK 9 ODNE antifitte. STATE OT



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

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ANNUAL REPORT

PART I LOBBYIST		
NAME (Last) (First) (Middle) Sadoski ⁄ Benjamin ∕ Charles		TELEPHONE 808-941-2141
MAILING ADDRESS (Street) 1516 South King Street		FAX 808-941-2166
		EMAIL bsadoski@5.unitehere.org
^(City) Honolulu	(State) _{HI}	(Zip Code) 96826
LOBBYIST FIRM/EMPLOYER (Fill in only if you 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 ORGANIZA	TION	
NAME OF ORGANIZATION UNITE HERE Local 5-	YOU LOBBY FOR (Do not abbreviate)	TELEPHONE 808-941-2141
MAILING ADDRESS (No. and Street or P.O Box) 1516 South King Street		FAX 808-941-2166
		EMAIL 0
^(City) Honolulu	(State) HI	(Zip Code) 96826

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

Fees	Amount
Compensation	Amount \$600.
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 Services	□Customer Services
□Culture & Arts	□Housing	□Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Safety & Welfare	□Tourism
□Transportation	I Zoning & Planning	Image: Specific Legislation: Bill No. 15 (Year) 2017 Reso No. 17-303 (Year) 2017 Admin. Rule No.
Other (indicate below): Bill 74 (2015); Bill 75 (2015); Bill 62 (2017); Resolution 17-221 (2017) (and related permit application 2017/SDD-24); Resolution 17-52 (2017)		

PART VI POLICY MAKING PROCESS DECISIONS YOU SOUGHT TO INFLUENCE AND OUTCOME

^{1.} See attached	4.
2.	5.
3.	Check here if additional sheets are attached

PART VII LOBBYIST CERTIFICA	TION STATE of Hawan'Z
I hereby certify that the foregoing statements a and correct. UDBBYIST SIGNATURE UV4/18 DATE	This <u>4</u> th day of <u>January</u> , <u>2018</u> . By: <u>Susan E.M.C. Susan E.M.C. </u>
	e: January 10 th of Each Year E: This is a public document Doc. Date: <u>19-/2017</u> # Pages <u>2</u> Notary Name: Susan E. Milton <u>1st</u> Circu Doc. Description <u>Hanwal Report</u>

NOTARY PUBLIC 2 * No. 09-82 ATE OF HAVIN

(Lobbyist Amount Report)

1/4/18

Date

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Notary Signature

Bill / Reso	Subject	Outcome
	Modifications of the Land Use Ordinance re: IPD-T	
15 (2017)	permits in Transit Oriented Development zones	Passed
	Modifications of the Land Use Ordinance re: PD-T	
74 (2015)	permits in Transit Oriented Development zones	Passed
75 (2015)	Modifications of the Land Use Ordinance	Passed
	Modifications of the Land Use Ordinance re: PD-R	
17-303	and PD-A permits	Passed
17-221 (and related		
permit application		
2017/SDD-24)	IPD-T Permit for the 1500 Kapiolani Project	Passed
	Modifications of the Land Use Ordinance re: joint	
62 (2017)	development	Passed
17-52	Regulation and enforcement re: Vacation Rentals	Passed



HONOLULU ETHICS COMMISSION

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
Sakamoto Lee, Stefanle		808-524-4155
MAILING ADDRESS (Street)		FAX
1000 Bishop Street, Suite 503		
		EMAIL
		stef@sakamotoconsulting.com
(City) Honolulu	(State) _{HI}	(Zip Code)
Honolulu	HI	96813
LOBBYIST FIRM/EMPLOYER (Fill in only if you are employed by a business entity that has been retained to lobby)		TELEPHONE
BT Consulting, Inc. dba Advocates		. Same
MAILING ADDRESS (No. and Street or P.O Box)		FAX
Same		- Te
	:	EMAIL
		toyofuku@hiadvocates.com
(City)	(State)	(Zip Code)

PART II ORGANIZAT	ION	
NAME OF ORGANIZATION Y	OU LOBBY FOR (Do not abbreviate)	TELEPHONE
MAILING ADDRESS (No. and Street or P.O Box) 1455 Market Street, #400		FAX
,		EMAIL
(City) San Francisco	(State) _{CA}	(Zip Code) 94103

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		

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

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 Services	Customer Services	
Culture & Arts	□Housing	Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Safety & Welfare	□Tourism	
In Endicate below):	□Zoning & Planning	Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept	

iner (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 Subscribed and sworn to before me I hereby certify that the foregoing statements are true and correct. 2018 This 11 day of Jan-THINH HOWA & SHONY F By: LOBBYIST SIGNATURE NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATH 111 11/18 ł AAQ My commission expires: SEP - 7 209* DATE E OF HAMIN

Rev. 12/2017

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

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Signature NOTRRY CERTIFICETION

Date

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

THIS SPACE FOR OFFICE NOEUNLY ETHICS COMMISSION RECEIVED		
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ANNUAL REPORT

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
SAUNDERS, HARRY A.		(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 HAWAII		(808) 548-4188
MAILING ADDRESS (No. and Street or P.O Box) 680 IWILEI ROAD, SUITE 510		FAX (808) 548-2975
		EMAIL hsaunders@castlecooke.com
(City) HONOLULU	(State) HAWAII	(Zip Code) 96817

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) TEL		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)	(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 0.00	Amount 0.00	
Entertainment & Events	Amount 0.00	Other 0.00		
	in the second second	TOTAL 0.00		

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 Services	Customer Services
□Culture & Arts	⊠Housing	□ Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Safety & Welfare	□Tourism
□Transportation	⊠Zoning & Planning	□ Specific Legislation: 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. NONE 800 01/00/18	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 JANUS 2018 DATE	Subscribed and sworn to before me This day of Qanuary By: By: DATOC, State of Hawatt PUS KYOKO PATOC, State of Hawatt PUS NOTARY OF ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS My commission expires: June 14, 2020
Rev. 12/2017	

Date NOTE: This is a public document



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

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ANNUAL REPORT

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
SAUNDERS, HARRY A.		(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 HAWAII		(808) 548-4188
MAILING ADDRESS (No. and Street or P.O Box)		FAX (808) 548-2975
680 IWILEI ROAD, SUITE 510		
		EMAIL hsaunders@castlecooke.com
(City) HONOLULU	(State) HAWAII	(Zip Code)
		96817

PART II ORGANIZAT	ION	The second second second second
NAME OF ORGANIZATION	OU LOBBY FOR (Do not abbreviate)	TELEPHONE
CASTLE & COOKE PROPERT	IES, 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)
		96817

PART III EXPENDI	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 0.00	Amount 0.00
Entertainment & Events	Amount 0.00	Other 0.00	1
		TOTAL 0.00	

Fees 10 0 0-00 81	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 Services	Customer Services
□Culture & Arts	⊠Housing	□Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Safety & Welfare	□Tourism
□Transportation	⊠Zoning & Planning	Specific Legislation: 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. NONE 400/on/18	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	Subscribed and sworn to before me This Bay of January OKO PA By: KYOKO PATOC, State of Hawali NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER.OATELS My commission expires: No. 96-313 June 14, 2020	
Kyoko Patoc Doc. Description Rev. 12/2000 Date: 1 Close Paged Deadline: January 10 th of Each Year Way DC Notary Signature Date		



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

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
SAUNDERS, HARRY A.		(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 HAWAII		(808) 548-4188
MAILING ADDRESS (No. and Street or P.O Box) 680 IWILEI ROAD, SUITE 510		FAX (808) 548-2975
		EMAIL hsaunders@castlecooke.com
(City) HONOLULU (State) HAWAII		(Zip Code) 96817

PART II ORGANIZAT	ION	
NAME OF ORGANIZATION	OU LOBBY FOR (Do not abbreviate)	TELEPHONE
CASTLE & COOKE, 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) 96817

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

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 Services	Customer Services	
□Culture & Arts	☑Housing ☑Public Works, Infrastructure & Sustainability		
□Parks & Recreation	□Public Health, Safety & Welfare	□Tourism	
□Transportation	⊠Zoning & Planning	□ Specific Legislation: 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. NONE to D' log 18	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	Subscribed and sworn to before me This day of January 2018 By: ATOC, State of Hawaiio NOTARY OR ANY ORFICTAL!AUTHORIZED TO ADMINISTER DATHON My commission expires: June 14, 2020 NOTARY CERTIFICATION
Rev. 12/2017 Deadline: Januar NOTE: This is a	y 10 th of Each, Year, Notar Signature Date



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

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)	TELEPHONE
SEU, Scott W. H.		808-543-4805
MAILING ADDRESS (Stree	it)	FAX 808-203-1355
P. O. Box 2750	P. O. Box 2750	
		EMAIL scott.seu@hawaiianelectric.com
(City) Honolulu	(State) _{HI}	(Zip Code)
		96840
LOBBYIST FIRM/EMPLOY	ER (Fill in only if you are employed by a business entity that has been relained to lobby)	TELEPHONE
MAILING ADDRESS (No. a	and Street or P.O Box)	FAX
		EMAIL
(City)	(State)	(Zip Code)

PART II ORGANIZA	TION	
NAME OF ORGANIZATION	YOU LOBBY FOR (Do not abbreviate)	TELEPHONE
Hawaiian Electric Company, Inc.		
MAILING ADDRESS (No. a	nd Street or P.O Box)	FAX
P. O. Box 2750		EMAIL
(City) Honolulu	(State) HI	(Zip Code) 96840

PART III EXPENDI	FURES, 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	
BRUEL STR		TOTAL 0	

Ebse, Date: Date:

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Rev. 12/2017 200221 2020

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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 Services	Customer Services		
□Culture & Arts	□Housing	Public Works, Infrastructure & Sustainability		
Parks & Recreation	DPublic Health, Safety & Welfare	□Tourism		
□Transportation	DZoning & Planning	Specific Legislation: 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 . none in 2017	4.
2.	5.
3.	Check here if additional sheets are attached

PART VII LOBBYIST CERTIFICATION Subscribed and sworn to before me I hereby certify that the foregoing statements are true and compct. 10.1.8.111111, This 4th day of Jannan NAME. ESLIE IKE By: LOBBYIST SIGNATURE NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER 1/4/10 My commission expires: Comm. No DATE 13-380 ATE OC. Doc. Date: 1/4/18 ges: 2 ///// 佛理 Name: LOSIW THE St Circuit Deadline: January 10th of Each Year Rev. 12/2017 Doc. Description: HMOIUIU Ethic comm NOTE: This is a public document Annual Poport V4/18 1 Notary Signature Date My Commission Expires 11 3 2



HONOLULU ETHICS COMMISSION

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

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

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ANNUAL REPORT Lobbyist Annual Report

(Type or Print Clearly)

PART I LOBBYIST			
NAME (Last) (First) (Middle)	······································	TELEPHONE	
ShigeKuni, Vincent R		521-5631	
MAILING ADDRESS (Street)		FAX	
1001 Bishop Street, Suite 650	EMAIL vshigekuni@pbrhawaii.com		
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96813	
LOBBYIST FIRM/EMPLOYER (Fill in only if you are employed by a business entity that has been retained to lobby)		TELEPHONE	
PBR Hawaii & Associates, Inc.		521-5631	
MAILING ADDRESS (No. and Street or P.O Box)		FAX	
1001 Bishop Street, Suite 650		EMAIL vshigekuni@pbrhawaii.com	
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96813	

PART II ORGANIZATION				
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate).		TELEPHONE		
DG Development and Investmer	(435) 703-1800			
MAILING ADDRESS (No. and	FAX			
10421 South Jordan Parkway, Suite 600		EMAIL dangifford10@gmail.com		
(City) (State) South Jordan UT		(Zip Code) 84095		

PART III EXPENDI	FURES, 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	

Fees	Amount ₀
Compensation	Amount ₀
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 Services	Customer Services	
□Culture & Arts		□Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Safety & Welfare	□Tourism	
□Transportation	IZZONING & Planning	Specific Legislation: 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. increase in resort sign square footage - unsuccessful	4.
2.	52008 ¹¹ A 1000 0000 10000000 10000000
3.	□ Check here if additional sheets are attached

PART VII LOBBYIST CERT	FICATION
I hereby certify that the foregoing state and correct. Vucu Dugliu LOBBYIST SIGNATURE 12/27/17 DATE	This day of,, By:
Rev. 12/2017	Deadline: January 10 th of Each Year NOTE: This is a public document

12 - 27-17 # Pages ____ Doc. Date: ð Notary Name: Kim Choy First Circuit Doc. Description Annual Report Nor U 12-27-17 Notary Signature Date



YOHO MIZ

CITY AND COUNTY OF HONOLULU ETHICS COMMISSION LOBBYIST ANNUAL REPORT FORM

Name	Stovin	Gary	М.		
(Print)	Last	First	Mid	dle	-
Business Address	999 Bishop Street, #1400, (Street, City, State,		Phone ⁸	308-539-0428	
Email Address:	gslovin@awlaw.com				
State name and ad	dress of organization you lo	obbied for.			
Wyndham \ 6277 Sea H Orlando, FL					
	received as a lobbyist repre lobbying activities.	esenting contributions,	membership	fees and other	
\$0					
State total amount	expended for lobbying by I	lobbyist.		1 00	FTHI
\$0				JAN 1	
List results of the	egislation you sought to in		1 2017 #		
N/A	NI R. SOC	Name: Uilani R. Sou		First Circuit	
Other information	92-187	Hondulu Ethics	<u>Commissión</u> DEC	2 1. 2017	
None	TE OF H	NOTARY	CERTIFICATIO	Date ON	
l hereby certify that are true and correc	at the foregoing statements t.	Subscribed and sw This 2/ st day			
15 Z	1	By <u>Warne</u> Notary or any offic	Mai		S.C.
	nature)			D 2-187	
	E DATE OF THIS REPOR	form for information.)	EACH YEA	K T	
	(Dee Dack of this	ionin ior miormation.)		111 F H	

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

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ANNUAL REPORT

PART I LOBBYIST				
NAME (Last) (First) (Middle) Sword, MAx J	HERE WE REALLING TO IN	TELEPHONE		
MAILING ADDRESS (Street)		FAX		
P.O. Box 22782				
		EMAIL mswordconsulting@aol.com		
(City)	(State)	(Zip Code)		
Honolulu	` Hawaii	96823		
LOBBYIST FIRM/EMPLOYER (Fill in only if you	are employed by a business entity that has been retained to lobby)	TELEPHONE		
Max J Sword & Associates		808 927 3700		
MAILING ADDRESS (No. and Street or I	FAX			
P.O. Box 22782				
F.U. DUX 22762	EMAIL			
^(City) Honolulu	(State) Hawaii	(Zip Code)		
	Tawaii	90023		

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) Outrigger Enterprises Group ✓		TELEPHONE 808 921 6616
MAILING ADDRESS (No. and Street or P.O Box)		FAX
2375 Kuhio Ave.		EMAIL ed.case@outrigger.com
^(City) Honolulu	^(State) Hawaii	(Zip Code) 96815

PART III EXPENDI	TURES, BY TYPE		
Political Contributions	Amount 11,000	Receptions, Meals, Food & Beverages	Amount 259.90
Preparation & Distribution of Lobbying Materials	Amount	Media Advertising	Amount
Entertainment & Events	Amount	Other	
	4	TOTAL	11,259.90

Fees	Amount
Compensation	Amount 34,000
Contributions	Amount
Membership Fees	Amount
Check here if additional sheets are attached	🗆 n/a

PART V DESCRIPTION OF SUBJECTS ON WHICH YOU LOBBIED		
IBusiness & Economic Development	□Community Services	Customer Services
□Culture & Arts	□Housing	Public Works, Infrastructure & Sustainability
Parks & Recreation	Public Health, Safety & Welfare	⊠Tourism
⊠Transportation	⊠Zoning & Planning	□Specific Legislation: 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.} TVUs	4.
^{2.} Zoning Changes	5.
^{3.} Liquor Rules	□ Check here if additional sheets are attached

PART VII LOBBYIST CERTIFICATION	
I hereby certify that the foregoing statements are true and correct. Max K word LOBBYIST SIGNATURE 1/5/18 DATE	Subscribed and sworn to before me This day of By: NOTARY OR ANY OFFICIAN AUTHORIZED TO ADMINISTER OATHS My commission expires:

Rev. 12/2017

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

STATE OF HAWAII

CITY AND COUNTY OF HONOLULU

Subscribed and sworn to before me this _/8 th day of ______ _, 2018

))

)

Mar J. Sword by

Notary Public, State of Hawaii Dorinda Dunlap

My commission expires September 15, 2020



NOTARY CERTIFICATION STATEMENT

Iap_____ Jurisdiction: First Circuit Doc. Date: L Dorinda Dunlap

Printed Name of Notary

Document Identification or Description: Workluber Ethics Commession annual Nobbesist

Signature of Notary

Date of Notarization and Certification Statement





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

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Takaaze, Melissa K./		(808) 554-2798
MAILING ADDRESS (Street)		FAX
P.O. Box 38196		
		EMAIL
		m.takaaze@gmail.com
(City) Honolulu	(State) _{Hawaii}	(Zip Code)
Honolulu	Hawaii	96837
LOBBYIST FIRM/EMPLOYER (Fill in only if you	are employed by a business entity that has been retained to lobby)	TELEPHONE
MK Pacific Consulting, LLC		see above
MAILING ADDRESS (No. and Street or P.O Box)		FAX
see above		
		EMAIL
		see above
(City) (State)		(Zip Code)

PART II ORGANIZA	ΓΙΟΝ	
NAME OF ORGANIZATION	YOU LOBBY FOR (Do not abbreviate)	TELEPHONE
Hawaii Food Industry Associati	on 🖌	(808) 533-1292
MAILING ADDRESS (No. and Street or P.O Box)		FAX
1050 Bishop St., PMB 235		
		EMAIL
(City)	(State)	(Zip Code)
Y Honolulu	Hawaii	96813

PART III EXPENDI	URES, 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 0.00
Compensation	Amount 250.00
Contributions	Amount 0.00
Membership Fees	Amount 0.00
Check here if additional sheets are attached	🗆 n/a

PART V DESCRIPTION OF SUBJECTS ON WHICH YOU LOBBIED		
Business & Economic Development	□Community Services	Customer Services
□Culture & Arts	□Housing	Public Works, Infrastructure & Sustainability
□Parks & Recreation	Public Health, Safety & Welfare	□Tourism
□Transportation	□Zoning & Planning	□ Specific Legislation: 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

3.	Check here if additional sheets are attached
2. Bill 9 (food waste)> deferred in committee	5.
1. Bill 59 (plastic bags)> enacted 07/24/17	4.

PART VII LOBBYIST	CERTIFICATION		
I hereby certify that the foregoing statements are true		Subscribed and sworn to before me	Li tra
and correct.		This day ofJAN 0 8 2018	TAYON'
Melissa Ja LOBBYIST SIGNATURE	laaye	By:	
LOBBYIST SIGNATURE	0	NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS NO. 17-	-147 /
DATE		My commission expires: JUN 11 2021	HAWAN
	NHS HAY	Doc. Date # Pages_ 2	11122
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	No. 17-147	1/4/	
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HONOLULU ETHICS COMMISSION

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

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

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Takemoto, Alan, T.		685-8371
MAILING ADDRESS (Street)		FAX 685-8365
P.O. Box 200 94-520 Kunia Rd.		EMAIL alan.takemoto@monsanto.com
(City) Kunia	(State) Hawaii	(Zip Code)
		96759
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 P.O Box)		FAX
		EMAIL
(City)	(State)	(Zip Code)

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE	
Monsanto Company	685-8371		
MAILING ADDRESS (No. and Street or P.O Box)		FAX 685-8365	
P.O. Box 200 94-520 Kunia Rd.		EMAIL	
(City) Kunia	(State) Hawaii	(Zip Code) 96759	

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		

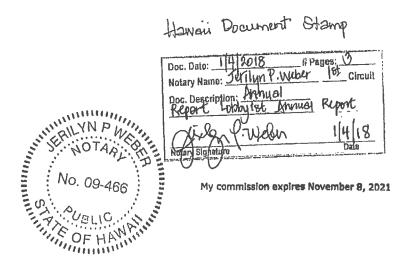
Fees	Amount
Compensation	Amount \$1,500.00
Contributions	Amount
Membership Fees	Amount
□ Check here if additional sheets are attached	🗆 n/a

PART V DESCRIPTION OF SUBJECTS ON WHICH YOU LOBBIED				
Business & Economic Development	□Community Services	□Customer Services		
□Culture & Arts	□Housing	⊠Public Works, Infrastructure & Sustainability		
Parks & Recreation	Public Health, Safety & Welfare	□Tourism		
□Transportation	⊠Zoning & Planning	□ Specific Legislation: 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. NONE 49 Y8/18	4.
2.	5.
3.	□ Check here if additional sheets are attached

PART VII LOBBY	IST CERTIFICATION		
I hereby certify that the for and correct. Alan Takemoto LOBBYIST SIGNATURE 1/02/18 DATE	in Steeld	Subscribed and sworn to before me This <u><u>H</u>th</u> day of <u>January</u> , By: <u>John and</u> <u>January</u> , Notary Dr Any Greicial Authonized to Ada My commission expires: My commission expires November 8, 2	
Rev. 12/2017		/ 10 th of Each Year public document	No. 09-466





HONOLULU ETHICS COMMISSION

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
Tam, Sharene, A.S.		8086899611
MAILING ADDRESS (Street) 91-1001 Kaimalie Street #205		FAX 8086895757
		EMAIL
		stam@haseko.com
(City) _{Ewa Beach}	(State) _{HI}	(Zip Code)
	111	96706
LOBBYIST FIRM/EMPLOYER (Fill in only if you	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 YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
Haseko (Ewa), Inc., Haseko De	8086899611	
MAILING ADDRESS (No. ar 91-1001 Kaimalie Street #205	FAX 8086895757	
		EMAIL stam@haseko.com
(City) Ewa Beach	(State) _{HI}	(Zip Code) 96706

PART III EXPENDI	FURES, 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 _{\$1,000.00}	
		TOTAL \$1,000.00	

Fees	Amount \$0.00
Compensation	Amount \$3,500
Contributions	Amount \$0.00
Membership Fees	Amount \$0.00
□ Check here if additional sheets are attached	□ n/a

PART V DESCRIPTION OF SUBJECTS ON WHICH YOU LOBBIED □ Business & Economic Community Services □Customer Services **Development** □Public Works, Infrastructure & Culture & Arts Housing Sustainability □Parks & Recreation □Public Health, Safety & Welfare □**Tourism** Specific Legislation: Bill No. ____(Year) □ Transportation Zoning & Planning Reso No. (Year) Admin. Rule No. Dept. Other (indicate below):

PART VI POLICY MAKING PROCESS DECISIONS YOU SOUGHT TO INFLUENCE AND OUTCOME

¹ . Discuss updates to the Land Use Ordinance. No decision.	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
	This 10th day of January, 2018.
LOBBYIST SIGNATURE	By: Menta Ableffeld NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS Nobuleo S. Holy Hold My commission expires:
	E GTARY C

Rev. 12/2017



925 DILLINGHA	U ETHICS COMMISSION M BOULEVARD, STE. 190, HONOL : (808) 768-9242 FAX: (808) 768-7 Email: <u>ethics@honolulu.gov</u> bsite: <u>http://www.honolulu.gov/eth</u> ANNUAL R Lobbyist Annual (Type or Print C	EPORT 18 JA	FOR OFFICE USE ONLY
PART I LOBBYIST NAME (Last) (First) (Middle) TANDA (CORLE) TANDA (CORLE) MAILING ADDRESS (Street) 307 A Kamani St. (City) Honoluku LOBBYIST FIRM/EMPLOYER (Fill in only if you are employed by a businese entity that has been relained to tobby) Common Cause MAILING ADDRESS (No. and Street or P.O Box) FAX 605 15th St, NW, Ste 800 (City) (State) (City) (State) (City) (City) (State) (Common Cause (City) (State) (City) (State) (City) (State) (City) (State) (City) (State) (City) (State) (State) (Zip Code) Washington DC			
Washington 9C 20005 PART II ORGANIZATION NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) TELEPHONE Common Cause Hawaii (805) 275 - 4275 MAILING ADDRESS (No. and Street or P.O Box) FAX 307A Kamani St (City) (State) (Zip Code) Honolulin H1 96 413 PART III EXPENDITURES, BY TYPE Political Contributions Amount Preparation & Distribution Amount Media Advertising Amount of Lobbying Materials O Other Other			

Fees	Amount 🕐
Compensation	Amount 300
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 Services	Customer Services
⊡Culture & Arts	□Housing	□Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Safety & Welfare	□Tourism
Image: Transportation Image: Transporta		
Dother (indicate below): Good government issues, such as Etnics, toms parency, etc.		

PART VI POLICY MAKING PROCESS DECISIONS YOU SOUGHT TO INFLUENCE AND OUTCOME

1. Bill 90 (2017) Passed 2nd reading as of this printing Oppose	4.
2.	5.
3.	□ Check here if additional sheets are attached

PART VII LOBBYIST CERTIFICATION
I hereby certify that the foregoing statements are title Subscribed and sworn to before me and correct. NOTARY PUBLIC This
Rev. 12/2017 Deadline: Jan 8 2618 Notary Signature Deadline: Jan 8 2618 NOTE: This is a public document

	HONOLULU ETHICS COMMISSION 925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817 TEL: (808) 768-9242 FAX: (808) 768-7768	THIS SPACE FOR OFFICE USE ONLY	
And the second	Email: <u>ethics@honolulu.gov</u> Website: <u>http://www.honolulu.gov/ethics/</u>	HONOLULU ETHICS COMMISSION RECEIVED	
	ANNUAL REPORT Lobbyist Annual Report (Type or Print Clearly)	18 JAN -8 P4:24	
PARTIL	OBBYIST		

NAME (Last) (First) (Middle)		TELEPHONE
Taniquchi, Chad &	Zen	8082558271
MAILING ADOBESS (Street) 3442 Waialar Ave Hono/w/m, 12 96814	A 1	FAX
3442 Waialar Atve		
Hono/ulu, 127 9681	5 5	EMAIL
		chada hbl.org
(City) Hono /u /u	(State)	EMAIL Chadadhbl.org (Zip Code) 46816
		96516
LOBBYIST FIRM/EMPLOYER (Fill in only if you	are employed by a business entity that has been retained to lobby)	TELEPHONE
NA		
MAILING ADDRESS (No. and Street or F	P.O Box)	FAX
NA		EMAIL
(City) NA	(State)	(Zip Code)
AV AF	, ,	
1.5465		

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU I	OBBY FOR (Do not abbreviate)	TELEPHONE
Hawaii Bicycling League		8087355756
MAILING ADDRESS (No. and Street or P.O Box)		FAX
MAILING ADDRESS (No. and Street or P.O Box) 3442 Walace Ave A		8087357989
		EMAIL bicy de Dhbl. ng
	bicydenhbl.ng	
(City) Amolulu	(State)	(Zip Ćode)
· Urnolulu		96516

PART III EXPENDIT	TURES, BY TYPE		
Political Contributions	Amount Ø	Receptions, Meals, Food & Beverages	Amount
Preparation & Distribution of Lobbying Materials	Amount #/00	Media Advertising	Amount Ø
Entertainment & Events	Amount Ø	Other	
14 MAN 40 31 MAN 32 SMALL		TOTAL \$ (00	Decument Date

-Notary Sciine Akina Kali, Tangadai Terri Caratt Doc Description: 😜

Fees	Amount @ MA
Compensation time to testify on bills	Amount #1330
Contributions	Amount N A
Membership Fees	Amount NA
□ Check here if additional sheets are attached	□ n/a

PART V DESCRIPTION OF SUBJECTS ON WHICH YOU LOBBIED			
☐Business & Economic Development	□Community Services	□Customer Services	
□Culture & Arts	□Housing	Public Works, Infrastructure & Sustainability	
□Parks & Recreation	Public Health, Safety & Welfare		
Transportation	□Zoning & Planning	□ Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept	
□Other (indicate below): City Council Bills 74,75(2015); 67(2016), 77(2017), Reso 17-173, GIA(2017 re biteshare)			

PART VI POLICY MAKING PROCESS DECISIONS YOU SOUGHT TO INFLUENCE AND OUTCOME

1. Se	e above Part V	4.
2.	attached for 3/5/18	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 Document Date: 12-27-17 # pgs: 2 Notary Name: Alana K.M. Taniguchi First Circuit Doc. Description: Annual Report Rev. 12/2017 Rev. 12/2017 Mandor Mana Lange Date Notary Signature Date Targe Date Date Targe Date Deadline: January Targe Date Targe Date Targ	

Lobbyist Annual Report Chad Taniguchi Additional Information for Part VI Outcomes

Bill 74 and 75 (2015) – passed in October 2017 GIA (2017) Bikeshare Hawaii's community application – pending decision making Bill 67 (2016) – passed in June 2017 Resolution 17-173 – passed in July 2017 Bill 77 (2017) – passed in February 2018



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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HONOLULU ETHICS COMMISSION RECEIVED 2 · 14 · 18 JAN -2 P 3 :34

ANNUAL REPORT Lobbyist Annual Report

(Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Thornton, Gavin Keith		808-587-7605
MAILING ADDRESS (Street)		FAX
119 Merchant Street, Ste. 605A		
		EMAIL
		gavin@hiappleseed.org
(City) Honolulu	(State) HI	(Zip Code)
		96813
LOBBYIST FIRM/EMPLOYER (Fill in only if you 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 ORGANIZAT	ION	
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
Hawaii Appleseed Center for Law & Economic Justice		808-587-7605
MAILING ADDRESS (No. and Street or P.O Box)		FAX
119 Merchant Street, Ste. 605A		
		info@hiappleseed.org
(City) Honolulu	(State)	(Zip Code)
Tonolaid	rn	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 NONE	

Fees	Amount NA
Compensation	Amount \$606
Contributions	Amount NA
Membership Fees	Amount NA
□ Check here if additional sheets are attached	□ n/a

PART V DESCRIPTION OF SUBJECTS ON WHICH YOU LOBBIED			
□Business & Economic Development	□Community Services	Customer Services	
□Culture & Arts	⊠Housing	□Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Safety & Welfare	□Tourism	
□Transportation	⊠Zoning & Planning	Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept	
Other (indicate below):			

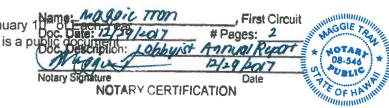
PART VI POLICY MAKING PROCESS DECISIONS YOU SOUGHT TO INFLUENCE AND OUTCOME

1	^{1.} Bill 15 (TOD Affordable Hsg Requirements) - Advored	4.
and a second sec	2. Reso 16-308 (commenting on housing proposals) - Adop	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 12 12 DATE Subscribed and sworn to before me This <u>397A</u> day of <u>DCCCMbV</u>, <u>3017</u> By: Mcggud NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMANATER OF THE SUBSCRIBE STREET OF THE SUBSCRIPTION OFFICIAL AUTHORIZED TO ADMANATER OFFICIAL

2/19 prone

> Deadline: January 1 NOTE: This is a public





HONOLULU ETHICS COMMISSION

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

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

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ANNUAL REPORT

 Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST				
NAME (Last) (First) (Middle)			TELEPHONE	
Toyofuku, Robert, S.			(808) 524-4155	
MAILING ADDRESS (Street)	•		FAX	
1000 Bishop Street, Suite 503				
100 C		•	EMAIL	
1		,	toyofuku@hiadvocates.com	
(City) Honolulu	(State) _{HI}	· · · · · · · · · · · · · · · · · · ·	(Zip Code)	
	HI	3	96813	122
LOBBYIST FIRM/EMPLOYER (Fill in only if you are employed by a business entity that has been retained to lobby)			TELEPHONE	
BT Consulting, Inc. dba Advocates		18 · · ·	10	
MAILING ADDRESS (No. and Street	or P.O Box)		FAX	
1000 Bishop Street, suite 503			· · · · · · · · · · · · · · · · · · ·	
	•		EMAIL	
(City) Honoululu	(State) HI		(Zip Code)	_
	· · · · · · · · · · · · · · · · · · ·	4	96813	

PART II ORGAN	IIZATION	82
NAME OF ORGANIZA	TION YOU LOBBY FOR (Do not abbreviate)	TELEPHONE
Hawaiian Humane Society -		(808) 356-2200
MAILING ADDRESS (No. and Street or P.O Box) 2700 Waialae Avenue		FAX
		EMAIL
(City) Honolulu	(State) HI	(Zip Code) 96826

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		

Rev. 12/2017

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 Services		
□Culture & Arts	□Housing □Public Works, Infrastructure & Sustainability		
□Parks & Recreation	Public Health, Safety & Welfare		
□Transportation	□Zoning & Planning	Specific Legislation: Bill No. 22 (Year)2017 Reso No(Year) Admin. Rule No Dept	
□Other (indicate below):			

PART VI POLICY MAKING PROCESS DECISIONS YOU SOUGHT TO INFLUENCE AND OUTCOME

"Bill 22 emuted as orchnome 17-43	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
CLOR TOP	This 28th day of December, 2017.
LOBBYIST SIGNATURE	By: Jammy in Joshi NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS TAMANY MY YORLING NOTARY PUBLIC
DATE	TAMMY M. YOSHIMURA State of Haway My commission expires: 9-22-2020

Rev. 12/2017

Notary certificate on next page. Deadline: January 10th of Each Year NOTE: This is a public document

Doc. Date: 12/28/2017	# Pages: <u>3</u>
Notary Name: TAMMY m. CSmi	MURA First Circuit
Doc. Description: <u>Annual Rep</u> Lobby of Annual Report	2017-
Oammy M. 2001. Notary Signature	レタ. レター Date (Stamp or Seal) Date

<u>.</u>



HONOLULU ETHICS COMMISSION

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

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

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	18	JAN 10	P7:06

ANNUAL REPORT

Lobbyist Annual Report

(Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Toyofuku, Robert, S.		(808) 524-4155
MAILING ADDRESS (Street)	· · · · · · · · · · · · · · · · · · ·	FAX
1000 Bishop Street, Suite 503	· · · · · · · · · · · · · · · · · · ·	
		EMAIL
		toyofuku@hiadvocates.com
(City) _{Honolulu}	(State) _{HI}	(Zip Code)
нопоша	FII .	96813
LOBBYIST FIRM/EMPLOYER (Fill In only if	you are employed by a business entity that has been relained to lobby)	TELEPHONE
BT Consulting, Inc. dba Advocates		(415) 986-2715
MAILING ADDRESS (No. and Street of	r P.O Box)	FAX
1000 Bishop Street, suite 503		24 - 24 - 24 - 24 - 24 - 24 - 24 - 24 -
		EMAIL
(City) Honoululu	(State) _{HI}	(Zip Code)
Honoululu		96813

PART II ORGANIZATION			
NAME OF ORGANIZATION	YOU LOBBY FOR (Do not abbreviate)	TELEPHONE	
Hawaii Credit Union League MAILING ADDRESS (No. and Street or P.O Box) 1654 South King Street		(808) 941-0556	
		FAX	
		EMAIL	
(City) Honolulu	(State) _{HI}	(Zip Code) 96826	

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	

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 Services	Customer Services			
□Culture & Arts	Housing	□Public Works, Infrastructure & Sustainability			
Parks & Recreation	□Public Health, Safety & Welfare	Tourism			
□Transportation	Zoning & Planning	□Specific Legislation: 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.	NIA			4.				
2.		2	8	5.	• E @) 5 ₆	8	lås.	53 19
3.				🗆 Ch	eck here if addit	ional sheets	are attach	ed

PART VII LOBBYIST CERTIFICATION

	ubscribed and sworn to before me
and correct.	his 29th day of December, 2017.
December 38,3017 M	Y: Oammy'm yok: OTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS Notary Public, Notary Public, State of Hawaie 9-22-2020 L.S.

Notary certificate on next page. Deadline: January 10th of Each Year NOTE: This is a public document

Rev. 12/2017

Doc. Date:	12/28/2017	# Pages:	3
Notary Name:	TAMMY M OSHMURA	First	Circuit
Doc. Description	on: Annual Report		
Lobbyist An	nnual Report		
Oamonyn Notary Signatur	e 200/2 12/2	<u>-R/2017</u> (Stamp Date	L.S. o or Seal)



HONOLULU ETHICS COMMISSION

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

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: <u>ethics@honolulu.gov</u> Website: <u>http://www.honolulu.gov/ethics/</u> THIS SPACE HODNOTHULEJUSE ONLY ETHICS COMMISSION RECEIVED 91.12.18-18 JAN 10 P7:06

ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Toyofuku, Robert, S.		(808) 524-4155
MAILING ADDRESS (Street) 1000 Bishop Street, Suite 503	· · · · · · · · · · · · · · · · · · ·	FAX
	•	EMAIL
		toyofuku@hiadvocates.com
(City) Honolulu	(State) _{HI}	(Zip Code)
Honolulu	j~1	96813
LOBBYIST FIRM/EMPLOYER (Fill in only if yo	ou are employed by a business entity that has been retained to lobby)	TELEPHONE
BT Consulting, Inc. dba Advocates		(415) 986-2715
MAILING ADDRESS (No. and Street or 1000 Bishop Street, suite 503	P.O Box)	FAX
		EMAIL
(City)	(State)	(Zip Code)
Honoululu		96813

PART II ORGANIZATIO	N	
NAME OF ORGANIZATION YO	U LOBBY FOR (Do not abbreviate)	TELEPHONE
Uber Technologies -		
MAILING ADDRESS (No. and S 1455 Market Street, #400	treet or P.O Box)	FAX
		EMAIL
(City) San Francisco	(State) _{CA}	(Zip Code) 94103

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 O				

Rev. 12/2017

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 Services	Customer Services		
Culture & Arts	□Housing	Public Works, Infrastructure & Sustainability		
□Parks & Recreation	□Public Health, Safety & Welfare	□Tourism		
Other (indicate below):	□Zoning & Planning	□ Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept		

PART VI POLICY MAKING PROCESS DECISIONS YOU SOUGHT TO INFLUENCE AND OUTCOME

1.	NIA	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. $H_{bbs}A = J_{cc} H_{bbs}$ LOBBYIST SIGNATURE $H_{cc} H_{bs} > 28, 2017$ DATE	Subscribed and sworn to before me This <u>29th</u> day of <u>Decentrator</u> , <u>2017</u> . By: <u>Damony m 2nl-</u> NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS TAMMY M. YOSHIMURA Hotary Public. My commission expires: <u>9-22-2020</u> L.S.

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

Notary certificate on next page.

Rev. 12/2017

Doc. Date:	12/28/2017	# Pages: _	3
Notary Name:	TAMMY M. YOSHIMURA	First	_ Circuit
Doc. Description	nual Report		
Oamony m Notary Signature	- Jali 12/2	(Star Date	しs. np or Seal)

CITY AND COUNTY OF HONOLULU ETHICS COMMISSION LOBBYIST ANNUAL REPORT FORM

Name	Tsujimura /	Matthew 1		W.	
(Print)	Last	First	M	liddle	
Business Address	999 Bishop Street, #1400 (Street, City, State		_ Phone	808-539-0	0400
Email Address:	mtsujimura@awlaw.com				
State name and ad	dress of organization you lo	obbied for.			
Wyndham V 6277 Sea H Orlando, FL					
	received as a lobbyist repre lobbying activities.	esenting contributions,	membersł	nip fees and	l other
\$0				JAN 10	HICS CON RECEI
State total amount	expended for lobbying by	lobbyist.		0 P7	VED
\$0				:03 20: 1	ION
List results of the l	egislation you sought to in:	fluence.	2017		1
N/A	NHANI R. SOCIE	Doc. Date: NFC 2 Name: <u>Uilani R. Sc</u> Doc. Description: <u>Cur</u>	uza Yand Wa	noter of H	l Circuit
Other information.	* 92-187 *	Ethics Commission			<u>keport</u> h 2017
None	PLE OF HAWPING	Signature	CERTIFIC	ATION	Date
I hereby certify that are true and correc	at the foregoing statements t.	Subsonibed and sw This BARS day	orn to bef of <u>DUE</u>	ore me	20 M
\nearrow	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	By Working drainy drain	Ξ II	ed to adminis arch 24, 2	
- Cn		— My ² commission expire	is: UM	LURCH 24, 2	.040
(Sign	nature)				

(See back of this form for information.)

PLEASE RETAIN A COPY FOR YOR RECORDS



HONOLULU ETHICS COMMISSION

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

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

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Tsujimura Riek B.		(808) 539-0400
MAILING ADDRESS (Street)		FAX (808) 533-4945
999 Bishop Street, Suite 1400		
		EMAIL
		rtsujimura@awlaw.com
(City) Honolulu	(State) Hawaii	(Zip Code)
		96813
LOBBYIST FIRM/EMPLOYER (F	ill in only if you are employed by a business entity that has been ratained to lob	by) TELEPHONE
SanHi Government Strategies, A Limited Liability Law Partnership		(808) 539-0400
MAILING ADDRESS (No. and S	treet or P.O Box)	FAX (808) 533-4945
999 Bishop Street, Suite 1400		(808) 535-4945
		EMAIL
		rtsujimura@awlaw.com
(City) (State)		(Zip Code)
Honolulu	Hawaii	96813

PART II ORGANIZA	ATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE	
Wyndham Vacation Ownership		(407) 626-5848	
MAILING ADDRESS (No. and Street or P.O Box)		FAX 407-626-5223	
6277 Sea Harbor Drive		EMAIL	
		wyndhamvacation@wyn.com	
(City) Orlando	(State) Florida	(Zip Code)	
		32821	

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

Fees \$0	Amount \$0
Compensation \$0	Amount \$0
Contributions \$0	Amount \$0
Membership Fees \$0	Amount \$0
□ Check here if additional sheets are attached	図 n/a

PART V DESCRIPTION OF SUBJECTS ON WHICH YOU LOBBIED				
□Business & Economic Development	□Community Services	Customer Services		
□Culture & Arts	□Housing	□Public Works, Infrastructure & Sustainability		
□Parks & Recreation	□Public Health, Safety & Welfare	□Tourism		
□Transportation	□Zoning & Planning	□Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept		
AOther (indicate below): NONE & or				

PART VI POLICY MAKING PROCESS DECISIONS YOU SOUGHT TO INFLUENCE AND OUTCOME		
1. NONE 400 0 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 JAN 0 9 2018 DATE	Subscribed and sworn to before me This <u>944</u> day of <u>AtMUWW</u> , <u>2018</u> . BOUK TO ADMINISTER OATHS BOUK OFFICIAL AUTHORIZED TO ADMINISTER OATHS Wy commission expires: March 24, 2020

Rev. 12/2017

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



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

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

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Wang, Cynthia		(415) 389-6800
MAILING ADDRESS (Street)		FAX (415) 388-6874
c/o 2350 Kerner Blvd., Ste. 250		
		EMAIL
	- -	airbnb@nmgovlaw.com
^(City) San Rafael	(State) CA	(Zip Code)
San Kalael		94901
LOBBYIST FIRM/EMPLOYER (Fill in only if you are employed by a business entity that has been retained to lobby)		TELEPHONE
N/A		
MAILING ADDRESS (No. and Street or	P.O Box)	FAX
		EMAIL
(City)	(State)	(Zip Code)

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
Airbnb, Inc.		(415) 389-6800
MAILING ADDRESS (No. and Street or P.O Box)		FAX (415) 388-6874
c/o 2350 Kerner Blvd., Ste. 250		(413) 300-0074
		EMAIL
		airbnb@nmgovlaw.com
(City)	(State) CA	(Zip Code)
San Rafael	CA	94901

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		
distribution of the		TOTAL 0.00		

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 OF SUBJECTS ON WHICH YOU LOBBIED			
□Business & Economic Development	□Community Services	Customer Services	
□Culture & Arts	□Housing	Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Safety & Welfare	□Tourism	
□Transportation	□Zoning & Planning	□ Specific Legislation: 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. Subscribed and sworn to before me This ______ day of ______. LOBBYIST SIGNATURE I - 18 DATE Subscribed and sworn to before me This ______ day of ______. By: NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS My commission expires:

Rev. 12/2017

See Statement Below (Lines 1-6 to be completed only by document signer[s], not Notary) Signature of Document Signer No. 1 Signature of Document Signer No. 2 (if any) A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document. Subscribed and sworn to (or affirmed) before me County of SAN FRANCISCO (and (2)______ Name(s) of Signer(s) WILLIE CHAVEZ _), Notary Public - California 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. Signature of Notary Public Signature _ Seal Place Notary Seal Above **OPTIONAL** ⁻ Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document. Description of Attached Document LOBBYIST ANNUAL REPORT, HIL ETHICS COMMISION _____ Document Date: _____/ / / / / / 8 Title or Type of Document: Number of Pages: _____ Signer(s) Other Than Named Above: __

State of California

	0110111	10 (01	aminioaj	
on this 10^{H}	day of	JANU	ARY	_, 20_17,
by Date		٨	Nonth	Year
(1) CYNTHIA	WAN	VG		

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CALIFORNIA JURAT WITH AFFIANT STATEMENT

□ See Attached Document (Notary to cross out lines 1–6 below)

GOVERNMENT CODE § 8202



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

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

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		• ®
NAME (Last) (First) (Middle)	· · · · · · · · ·	TELEPHONE
Webster, Nahelani		(808) 524-4155
MAILING ADDRESS (Street) 1000 Bishop Street, Suite 503	······	FAX
		EMAIL nwebster@hiadvocates.com
(City) _{Honolulu}	(State) _{HI}	(Zip Code) 96813
LOBBYIST FIRM/EMPLOYER (Fill in (only if you are employed by a business entity that has been retained to lobby)	TELEPHONE
BT Consulting, Inc. dba Advocates		
MAILING ADDRESS (No. and Stree 1000 Bishop Street, suite 503	et or P.O Box)	FAX
×	2	EMAIL
(City) Honoululu	(State) _{HI}	(Zip Code) 96813

PART II ORGANIZA	TION	
NAME OF ORGANIZATION	YOU LOBBY FOR (Do not abbreviate)	TELEPHONE
Hawaiian Humane Society		(808) 356-2200
MAILING ADDRESS (No. and Street or P.O Box) 2700 Waialae Avenue		FAX
		ÊMAIL
		4
(City) Honolulu	(State) _{HI}	(Zip Code) 96826

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		

Rev. 12/2017

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 Services	Customer Services	
Culture & Arts	□Housing	Public Works, Infrastructure & Sustainability	
□Parks & Recreation	Public Health, Safety & Welfare	□Tourism	
□Transportation	□Zoning & Planning	Specific Legislation: Bill No. 22 (Year)2017 Reso No(Year) Admin. Rule No Dept	
□Other (indicate below):	(141)		

PART VI POLICY MAKING PROCESS DECISIONS YOU SOUGHT TO INFLUENCE AND OUTCOME

1. Bin	encoded, ordinance 17.13	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
northe	This 28th day of December, 2017.
LOBBYIST SIGNATURE	By: Damony m Zol-
DECEMBER 28, 2017	TAMMY M. YOSHIMURA My commission expires:
DATE	$\begin{array}{c} \text{Wy commission expires:} \\ q - \frac{1}{2} - \frac{1}{2}$
	Notary certificate on next page.

Rev. 12/2017



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

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ANNUAL REPORT Lobbyist Annual Report

(Type or Print Clearly)

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PART I LOBBYIST		
NAME (Last) (First) (Middle) Weisman, Donald, B:		TELEPHONE
Weisman, Donald, B	5	808-377-6636
MAILING ADDRESS (Street)		FAX 808-324-0556
677 Ala Moana Blud.	, Ste. 600	0
		EMAIL don.wevsman@heart. (Zip Code) 96813
(City) Honolulu	(State) HI	(Zip Code) 96 813
LOBBYIST FIRM/EMPLOYER (Fill in only if you 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 YOU LOBBY FOR (Do not abbreviate) American Heart Association,		TELEPHONE 808-677-6630
677 Ala Moaner Blud., Ste. 600		FAX 808-524-0556
		EMAIL
(City) Honolulu	(State) HT	(Zip Code) 9681≧

PART III EXPENDITURES, BY TYPE			
Amount	ø	Receptions, Meals, Food & Beverages	Amount Ø
Amount	ø	Media Advertising	Amount Ø
Amount	Ø	Other M (MA)	
		STATE STATE	Ø
	Amount Amount	Amount g Amount g	AmountReceptions, Meals, Food & BeveragesAmountØAmountØOther

Fees	Amount
Compensation	Amount \$220,00
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 Services	Customer Services
□Culture & Arts	□Housing	□Public Works, Infrastructure & Sustainability
□Parks & Recreation	Public Health, Safety & Welfare	□Tourism
□Transportation	□Zoning & Planning	Specific Legislation: Bill No. <u>70</u> (Year) <u>2017</u> Reso No(Year) Admin. Rule No Dept
□Other (indicate below):		· · · · · · · · · · · · · · · · · · ·

PART VI POLICY MAKING PROCESS DECISIONS YOU SOUGHT TO INFLUENCE AND OUTCOME

1. Provided written testimony in support of Bill 70.	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 This <u>3rd</u> day of <u>January</u> , <u>2018</u> . By J. J. M.
Rev. 12/2017	/ 10 th of Each Year

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

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

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*18 JAN 10 A10 :57			

ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Wilson, Brooke		808-847-5761
MAILING ADDRESS (Street)		FAX
1311 Houghtailing St.		EMAIL bwilson@hrcc-hawaii.com
(City) Honolulu	(State) HI	(Zip Code) 96817
LOBBYIST FIRM/EMPLOYER (Fill in only if you 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 ORGANIZAT	TION	
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
Hawaii Regional Council of Carpenters		808-847-5761
MAILING ADDRESS (No. and Street or P.O Box)		FAX
1311 Houghtailing St.		EMAIL bwilson@hrcc-hawaii.com
(City) Honolulu	(State) _{HI}	(Zip Code) 96817

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

Fees N/A	Amount 0
Compensation Salary	Amount Pro rata: \$2,700
Contributions N/A	Amount 0
Membership Fees N/A	Amount 0
□ Check here if additional sheets are attached	□ n/a

PART V DESCRIPTION OF SUBJECTS ON WHICH YOU LOBBIED				
Business & Economic Development	□Community Services	munity Services		
□Culture & Arts	⊠Housing	Public Works, Infrastructure & Sustainability		
□Parks & Recreation	□Public Health, Safety & Welfare	□Tourism		
□Transportation	⊠Zoning & Planning	□ Specific Legislation: Bill No(Year) Reso No(Year) Admin. Rule No Dept		
Other (indicate below):				

Dotner (Indicate below).

PART VI POLICY MAKING PROCESS DECISIONS YOU SOUGHT TO INFLUENCE AND OUTCOME

4. (17) Bill 3 - enacted 1. Reso 16-172 - enacted 2. (17) Bill 59 - Still pending ^{5.} Reso 16-255 - enacted 3. (17) Bill 78 - enacted Check here if additional sheets are attached

PART VII LOBBYIST CERTIFICATION I hereby certify that the foregoing statements are true

and correct.

January 8, 2018 DATE

Subscribed and sworn to before me This <u>1011</u> day of <u>(Januan</u> , -	2018 No 12-4
By: Thin My Chello	Diffe of the
NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMI Faith M. F. Aiello State of Hunan, Fi	NISTER OATHS
My commission expires:	

JP

02/13/18

Motang certification attached

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

Rev. 12/2017

Name: Faith M. F. Aiello	First_Circuit
Doc. Description: Lobby St Rigist	mth ME
Cupjectin Dui W Alelle 1/1	NO 92-421
Signature NOTARY CERTIFICATIO	Date N

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CONTROL OF HAM	925 DILLINGHA	J ETHICS COMMISS M BOULEVARD, STE. 190, H .: (808) 768-9242 FAX: (808) Email: <u>ethics@honolulu.g</u> bsite: <u>http://www.honolulu.g</u>	ONOLULU, HI 96817 768-7768 <u>10V</u> <u>ov/ethics/</u>	THIS SPACE FOR OFFICE USE ONLY HONOLULU ETHICS COMMISSION 91.5.18	
		Lobbyist Ar	REPORT nual Report rint Clearly)	1 8	JAN -3 P2:03
PARTIL	OBBYIST				
NAME (Last)	(First) (Middle	Acnold			TELEPHONE 677-0375
Wong Arnold MAILING ADDRESS (Street)			. i	FAX 671-6901	
94-1	497	(State)			EMAIL Stab 6250 yeloo co
(City) War	palue	(State)	HI		(Zip Code) 96797
	LOBBYIST FIRM/EMPLOYER (Fill in only if you are employed by a business entity that has been retained to lobby)			retained to lobby)	TELEPHONE
MAILING AD	DRESS (No. a	nd Street or P.O Box)	,		FAX
					EMAIL
(City)		(State)	:///I		(Zip Code)
	DRGANIZA		not obbyguigto)		TELEPHONE
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) Ironworkers Stasilization Fund				677-0375	
		nd Street or P.O Box)	10110		EAV
94-4	197 Uke				671-6901 EMAIL Stab625@yahos.cn
(City) War	saha	(State) HZ	-		(Zip Code) 94797
		URES, BY TYPE			
Pan I III Political Cont		Amount		Meals, Food	Amount
Preparation & of Lobbying M		Amount	Media Adve		Amount
Entertainmen		Amount	Other		

TOTAL

Fees D	Amount O
Compensation	Amount O
Contributions	Amount D
Membership Fees	Amount 0
□ Check here if additional sheets are attached	🗆 n/a

PART V DESCRIPTION OF SUBJECTS ON WHICH YOU LOBBIED			
ିମ୍ବଞିusiness & Economic Development	Community Services	□Customer Services	
□Culture & Arts	Housing		
\Box Parks & Recreation	□Public Health, Safety & Welfare	□Tourism	
	Sconing & Planning	□ Specific Legislation: 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. A Transmitter of the	4.
2.	5.
3.	□ Check here if additional sheets are attached

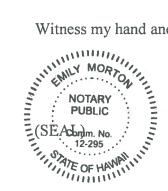
PART VII LOBBYIST CERTIFICATION	and and a set of the s
I hereby certify that the foregoing statements are true and correct.	Subscribed and sworn to before me This <u>3rel</u> day of <u>January</u> , <u>2016</u> .
LOBBYIST SIGNATURE	By: NOTARY OF ANY OF WAL AUTHORIZED TO ADMINISTER OATHS
12/29/17 DATE dated prior to signing	My commission expires:
signed 1/3/18 QN	allached

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

COUNTY OF HONOLULU

On this 3rd day of January 20 18, before me personally appeared ARNOW WONG to me known to be the person described in and who executed the foregoing instrument and acknowledgment that ___he executed the same as h_13____ free act and deed.

Witness my hand and seal.



EMILY

} } SS.

}

My Commission expires: ____ 09/02/2020

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Doc Date: 12/22/17	No. Pages:	r.
Notary Name: EMILY MORTON	Circuit	MANINITY,
Doc Description: Amnual Report	: Kobbyist Pinnual	IN CMILY MORYO
report	<u> </u>	SEAQTARY
Emily Morton	01 03 18 Date	Comm. No. 12-295



HONOLULU ETHICS COMMISSION

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

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

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
WONG, Kerstan J.	· • 161	808-543-7059
MAILING ADDRESS (Street)		FAX 808-203-1492
P. O. Box 2750		EMAIL kerstan.wong@hawaiianelectric.
(City) Honolulu	(State) HI	(Zip Code) 96840
LOBBYIST FIRM/EMPLOYER (Fill in only if you 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 ORGANIZA	TION	
NAME OF ORGANIZATION	YOU LOBBY FOR (Do not abbreviate)	TELEPHONE
Hawaiian Electric Company, I	nc	
MAILING ADDRESS (No. a	nd Street or P.O Box)	FAX
P. O. Box 2750		
		EMAIL
(City) Honolulu	(State)	(Zip Code)
HOIIDILL		96840

PART III EXPENDI	TURES, BY TY	PE	
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	

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ไปของ ปัจสม พ.สาระ <u>ป</u>องการ<u>เป็นการปรัฐ</u> ที่ได้สะ ปีสวมที่ ปัจมะ ปัจธระเห็นสาร

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and and a generative states and a

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 Services	
Culture & Arts	□Housing BPublic Works, Infrastructure & Sustainability	
Parks & Recreation	DPublic Health, Safety & Welfare	□Tourism
□Transportation	⊠Zoning & Planning	Specific Legislation: 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 none in 2017	4.
2.	5.
3.	Check here if additional sheets are attached

I hereby certify that the foregoing statements are true	Subscribed and sworn to before me
and correct.	This 8th day of January , 2018 .
LOBBYIST SIGNATURE	By: awette-nane Luke NOTARY OF ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS
1/8/2019 DATE	ALBERTA-NANI LUKE My commission expires: July 14, 2021
Alberte-Nani Luto Find Circuit Deadline: Janu Alberte-Nani Luto Find Circuit Deadline: Janu escription; E-thucs Commission NotE-This	N/ 10 of Each Year
VITA- New Fuke 1/8/2018	

AP COUNTY OF TO
PARTE OF HAWAY

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

LINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

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



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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

	TELEPHONE
	8087791024
	FAX
	EMAIL LORNAW31C-YAHOO.CON
(State) HI	(Zip Code)
ou are employed by a business entity that has been retained to lobby)	TELEPHONE
	008 9 40 991
P.O Box)	FAX
	INFOCDC50.0RG
(State) H1	(Zip Code) 96926
	P.O Box)

PART II ORGANIZATION NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) DISTRICT TELEPHONE INTENATIONAL UNION OF PAINTERS & ALLIED TRADES, COUNCILSO BOB 9410991 MAILING ADDRESS (No. and Street or P.O Box) FAX 22 40 YOUNG STREET EMAIL (City) (State) H1 (Zip Code) 96926

PART III EXPENDIT	URES, BY TYPE		
Political Contributions	Amount O	Receptions, Meals, Food & Beverages	Amount O
Preparation & Distribution of Lobbying Materials	Amount \$300.00	Media Advertising	Amount O
Entertainment & Events	Amount O	Other	101 42 61
29069	P. (1.5.2019	TOTAL \$30	D.00

c. Description

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Fees	Amount O
Compensation	Amount \$6,000.00
Contributions	Amount O
Membership Fees	Amount O
□ Check here if additional sheets are attached	□ n/a

PART V DESCRIPTION OF SUBJECTS ON WHICH YOU LOBBIED		
□Business & Economic Development	Community Services	□Customer Services
□Culture & Arts	□Housing	□Public Works, Infrastructure & Sustainability
□Parks & Recreation	□ Public Health, Safety & Welfare	□Tourism
□Transportation	Zoning & Planning	□Specific Legislation: 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. APPOINTEES TO HCDA BOARD MEMBERS (CONFIRMED)	4.
2.	5.
3.	□ Check here if additional sheets are attached

PART VII LOBBYIST CERTIF	ICATION	
I hereby certify that the foregoing stateme and correct. <u>JMM Mom M</u> LOBBYIST SIGNATURE 12-28.2017 DATE 9 th	APR 0 5 2019	CIAL AUTHORIZED TO ADMINISTER CATHS xpires:
	adline: January 10 th of Each Year	Boc. Date: 12 28 17 # Pages: Jame: Sholid S: Panergo S Circuit Joc. Description: April Ruport Shee 12 28
·	ser en en la papila desambrir s	Signature Date NOTARY CERTIFICATION

R

CITY AND COUNTY OF HONOLULU ETHICS COMMISSION LOBBYIST ANNUAL REPORT FORM

Name	Yajima	Tiffany	N.	
(Prir	nt) Last	First	Middle	
Business Add	ress 999 Bishop Street, i	#1400, Honolulu, HI 96813	Phone 808-539-0843	
		y, State, Zip Code)		
Email Address	s: tyajima@awlaw.com			
State name an	d address of organization	you lobbied for.		
6277 Se	am Vacation Ownership ea Harbor Drive o, FL 32821			
	bunt received as a lobby d to lobbying activities. $00 \downarrow 0 $	t representing contributions,	membership fees and other	
State total amo	ount expended for lobbyir	ng by lobbyist.		
φυ			AN THOM	
List results of	the legislation you sough	t to influence.	PLULU OMMISSION L-6-/8 10 P7:02	
Real F	Property Tax Measure- Pas	ssed	N	
Other informa	tion.			
Non	e		AN R.	Souther
I hereby certif are true and co	y that the foregoing stater prrect.		orn to before me of <u>plcinkin</u> , 2092/18 WB1	
John	nun	Motary or any officer of the comparison of the c	cial authorized to administer of the SOUZA es: March 24, 2020	TAP
((Signatufe)	-		2-187
Γ	DUE DATE OF THIS RI	EPORT IS JANUARY 10 OF	EACH YEAR DEC O C TR	UBLI
L			oc. Date: DEL UO LU	Pages:
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			NOTARY CERTIFICA	



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HONOLULU ETHICS COMMISSION

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

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

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HONOLULU ETHICS COMMISSION RECEIVED	
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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Yamasaki, Ross		(808) 531-4551
MAILING ADDRESS (Street)		FAX (808) 533-4601
222 South Vineyard Street, Suite 40	01	(808) 555-4001
		EMAIL
		ryamasaki808@gmail.com
(City) Honolulu	(State) HI	(Zip Code)
Попоши	П	96813
LOBBYIST FIRM/EMPLOYER (F	ill in only 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 S	treet or P.O Box)	FAX (000) FOIL AFEI
222 South Vineyard Street, Suite 40	01	(808) 531-4551
		EMAIL
		ryamasaki808@gmail.com
(City) Honolulu	(State) HI	(Zip Code)
		96813

PART II ORGANIZA	TION	· · · · · ·
NAME OF ORGANIZATION	YOU LOBBY FOR (Do not abbreviate)	TELEPHONE
Airbnb, Inc. 🗸		(415) 388-6874
MAILING ADDRESS (No. and Street or P.O Box) c/o Joel Aurora		FAX (415) 388-6874
NIELSEN MERKSAMER PARF -N/2350 Kemer Blvd., Suite 250		EMAIL airbnb@nmgovlaw.com
(City) San Rafael	(State) CA	(Zip Code) 94901

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 -NA-	

Fees	Amount
Compensation	Amount \$12,565.44
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 Services	Customer Services
□Culture & Arts	□Housing	Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Safety & Welfare	⊠Tourism
□Transportation	⊠Zoning & Planning	Specific Legislation: Bill No. <u>See Below</u> (Year) Reso No (Year) Admin. Rule No Dept
Other (indicate below):		

PART VI POLICY MAKING PROCESS DECISIONS YOU SOUGHT TO INFLUENCE AND OUTCOME

¹ . Bill 17-94 Deferred	⁴ . Resolution 17-52 Passed; Resolution 17-163 Passed
2. Bill 17-100 Deferred	⁵ . Resolution 17-164 Passed; Resolution 17-276 Passed
^{3.} Bill17-110 Introduced; Resolution 17-301 Passed	□ Check here if additional sheets are attached

PART VII LOBBYIST CERTIFICATION		
I hereby certify that the foregoing statements are trile and correct. NOTARY PUBLIC LOBBYIST SIGNATURE 1/10/18 DATE	Subscribed and sworn to before me This <u>I</u> that day of <u>A</u> <u>MUL</u> , <u>MUL</u> By NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS My commission expires: <u>SIY</u> /2020	

NOTARY CERTIFICATION ON BACK OF THIS PAGE

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

Rev. 12/2017

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Doc. Date: 1/10/16 # Pages 2 Notary Name. Bobbie J. Medeiros First Circuit Doc. Description Mul Report 1/10/10 Notary Signature Date



*s) _____



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

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

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Yamasaki, Ross		(808) 531-4551
MAILING ADDRESS (Street)		FAX (808) 533-4601
222 South Vineyard Street, Suite 401		
		EMAIL
		ryamasaki808@gmail.com
(City) Honolulu	(State) _{HI}	(Zip Code)
		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, LLP		(808) 531-4551
MAILING ADDRESS (No. and Street or	P.O Box)	FAX (000) FOR AFEA
222 South Vineyard Street, Suite 401		(808) 531-4551
		EMAIL
		ryamasaki808@gmail.com
(City) Honolulu	(State) HI	(Zip Code)
		96813

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 (916) 442-2449
1121 L Street, Suite 609		(916) 442-2449
		EMAIL
		Tim_Shestek@americanchemist
(City) Sacramento	(State) CA	(Zip Code)
Sacramento	UA CA	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 -NA-	

Fees	Amount
Compensation	Amount \$4,250
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 Services	□Customer Services
□Culture & Arts	□Housing	Public Works, Infrastructure & Sustainability
☑Parks & Recreation	□Public Health, Safety & Welfare	□Tourism
□Transportation	□Zoning & Planning	□ Specific Legislation: 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.} Bill 17-71 Deferred	4. Resolution 17-311 Introduced
2. Bill 17-73 Deferred	5. Resolution 17-340 Introduced
³ . Bill 17-108 Introduced	□ 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 This <u>ID</u> day of <u>JUD</u> , <u>2018</u> . By: <u>MUD</u> NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS My commission expires: <u>SIY/200</u>			
17444101				

NOTABY CERTIFICATION ON BACK OF THIS PAGE

Deadline: January 10th of Each Year

NOTE: This is a public document

Rev. 12/2017

1/10/18 # Pages ____ Doc. Date MA ros First Circuit Notary Name: Bobbie J. Medeiros NOTARY PUBLIC A MALLAND AND Doc. Description k No: 88-458 110/15 Notary Signature OFHA Date



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

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

Email: <u>ethics@honolulu.gov</u> Website: <u>http://www.honolulu.gov/ethics/</u> THIS SPACE FOR OFFICE USE ONLY

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HONOLULU ETHICS COMMISSION RECEIVED

ANNUAL REPORT Lobbyist Annual Report

(Type or Print Clearly)

18 JAN 10 P7:04

PART I LOBBYIST				
NAME (Last) (First) (Middle)		TELEPHONE		
Yamaychi, Jessica, PB MAILING ADDRESS (Street)		(808)591-6508		
MAILING ADDRESS (Street)		FAX		
		hone		
350 Richards st., Suite 2	-0)	EMAIL		
		jessica@hiphi.org		
(City)	(State)	(Zip Code)		
Honoiulu	1+1	96813		
LOBBYIST FIRM/EMPLOYER (Fill in only if you	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 YOU LOBI	BY FOR (Do not abbreviate)	TELEPHONE		
Hawais Public Health Inst	itute	(808)591-6508		
MAILING ADDRESS (No. and Street or	FAX			
850 Richards St., Suite 201		EMAIL		
(City)(State)(Zip Code)Honoly 1yH196613				

PART III EXPENDITURES, BY TYPE					
Political Contributions	Amount	Receptions, Meals, Food & Beverages	Amount		
Preparation & Distribution of Lobbying Materials	Amount \$30.00	Media Advertising	Amount		
Entertainment & Events	Amount	Other			
		TOTAL			

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 Services	□Customer Services		
□Culture & Arts	□Housing	Public Works, Infrastructure & Sustainability		
□Parks & Recreation	Public Health, Safety & Welfare	□Tourism		
□Transportation	□Zoning & Planning	□ Specific Legislation: 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. Bill 70, passed	4.
2.	5.
3.	Check here if additional sheets are structed
	N. N. and M. T.

PART VII LOBBYIST CERTIFICATION	NOTAR
I hereby certify that the foregoing statements are true and correct. AMMEN AMMAN LOBBYIST SIGNATURE JUNUE A. KOJIN DATE DATE JUNUE A. KOJIN JUNUE A. KOJINE A. KOJINE A. KOJINE A. KOJINE A. KOJINE	Subscribed and sworn to before me 0.2001-90 * This <u>4</u> TH day of <u>JAMAM</u> , <u>BUILS</u> By: NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS Julie A. Kojima My commission expires: My commission expires: 04/01/2021 <u>Doc Date</u> JAN 0 9 2018 # Pages: 2
Rev. 12/2017 Deadline: Januar	y 10 th of Each Year a public document Signature Name: <u>Julie A. Kojima</u> <u>Hest</u> Circuit Doc. Description: <u>Lobertist</u> <u>Anumar</u> <u>JAN 0.9.2018</u> Date NOTARY CERTIFICATION

CITY AND COUNTY OF HONOLULU ETHICS COMMISSION HONOLULU LOBBYIST ANNUAL REPORT FOR HICS COMMISSION RECEIVED

	1	1			7
Name Yosemo		oAnn	17 NOV 1	6 P1 52	
(Print)	Last	First	N	Aiddle	
Business Address	1177 Bishop Street, Hono	lulu, HI 96813	Phone	808-546-3868	
	(Street, City, State, Z	ip Code)			
Email Address:	joann.yosemori@hawaiian	tel.com			
State name and add	ress of organization you lob	bied for.			
	an Telcom Communications, ishop Street, Honolulu, HI 9				
State total amount r receipts related to lo	eceived as a lobbyist repres obbying activities.	enting contributi	ions, members	hip fees and other	
	0				
State total amount e	expended for lobbying by lo	bbyist.			
2	0				
List results of the le	gislation you sought to influe	uence.			
	0				
Other information.					
	the foregoing statements		nd sworn to be		summer and a second second
are true and correct.		This 15	day of Nove	mber, 20 <u>17</u> .	NUMUNINA MAG
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	· 0	GWENDOLYN My commission			TATE OF HAMIN
(Signa	ature)	NOTARY CRA	LTIPICATION	ON REVERSE SIL	DE

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

Rev. 9/2016 11/16/17

INFORMATION ON THE ANNUAL REPORT FORM

Filing Date. Each lobbyist must file with the Honolulu Ethics Commission an annual report for the preceding calendar year ending December 31. The report is due January 10 of each year, or if the date falls on a Saturday or holiday, the next business day.

Name of Lobbyist will be an individual's name, i.e., the name used on the original registration form.

Business Address of Lobbyist to include your telephone number and the name and address of your firm and telephone number.

Name and Address of Organization Lobbied For. This is the same organization you identified on your registration form.

Contribution Received. State the total amount you received directly or indirectly for lobbying. If you work for a service type of organization (such as an architectural firm) that receives a fixed fee from an organization, the amount received that can be directly attributed to legislative activities related to the organization should be included as part of the total amount. If your representation is indirectly related to the performance of your job, the dollar amount of the compensation you received based on the time spent directly in representation or influencing legislation should be included as a part of the total amount.

Expenditures. State the total amount of all expenditures that you have made in conjunction with your lobbying activities for the above organization. Example: Stationery costs, travel expenses, remunerations, political contributions and any other type of expenditures relating to the defeat or enactment of legislation.

Results of Representation. State results of the legislation you sought to influence. Example: Subject matter and whether an ordinance was enacted or a resolution was adopted.

Other Information to include any comments that you wish to become a part of your permanent file.

Each report form must be signed and certified under oath as true and correct by the lobbyist.

Legal Citation:

Signature

The legal citation for lobbyist registration is found in Chapter 3, Article 13, of the Revised Ordinances of Honolulu (ROH).

Penalties:

Except as otherwise provided in Ordinance No. 05-033, violation of any provisions of this article shall be grounds for suspension or revocation of the certificate of registration for a period of up to one year following hearing on the violation by the city council or its duly authorized committee.

Name: Gwendelyn A. Hassich 15+ Circuit

Doc. Description: Ct c of HNL Ethics

NOTARY CERTIFICATION

Commission Lubbyest Annual Report Form - HTCI



CITY AND COUNTY OF HONOLULU ETHICS COMMISSION ET LOBBYIST ANNUAL REPORT FORM

HONOLULU ETHICS COMMISSION RECEIVED

Rev. 9/2016

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Name Yosemor	ri Jc	Ann	17 NOV 16	P1 52	
(Print)	Last	First	Middle		
Business Address _	1177 Bishop Street, Honolu (Street, City, State, Zi		Phone 808-5	46-3868	
Email Address:	joann.yosemori@hawaiiante	el.com			
State name and add	ress of organization you lob	bied for.			
	an Telcom Services Company ishop Street, Honolulu, HI 96				
State total amount r receipts related to lo	eceived as a lobbyist represe obbying activities.	enting contributions, me	embership fees	and other	
	0				
State total amount e	expended for lobbying by lob	byist.			
	0				
List results of the le	gislation you sought to influ	ence.			
	0				
Other information.					
I hereby certify that are true and correct.	the foregoing statements	Subscribed and sworn This <u>l</u> 5- day of		_, 20 <u>[7</u> .	NUMERICA NO CONTRACTOR
(Signa	Hure)	By Jurnel A M Notary or any official GWENDOLYN A. MA My commission expires: NoTACY CERTIFICAT	SSIAH FEB. 22, 202	ninister oaths	D PUBLIC *
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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

INFORMATION ON THE ANNUAL REPORT FORM

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	# Fayes:
Name: Guendayn A. Massich	5+ Circuit
Doc. Description: Ct C of HNL	Rthres
Commission Lobbyiot Annue	& Report - HTSC
Signature / A Mussil	ulilin
NOTARY CERTIFICA	Date



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

Name	Yosemor	i	loAnn	•17 NOV 1	6 P1 52	
	(Print)	Last	First	Middl	e	
Busines	s Address _	1177 Bishop Street, Honc (Street, City, State, 2		Phone 80	08-546-3868	
Email A	ddress:	joann.yosemori@hawaiiar	itel.com			
State na	me and add	ress of organization you lol	obied for.			
		an Telcom, Inc. 🗸 ishop Street, Honolulu, HI 🤉	96813			
1		eceived as a lobbyist repres bbying activities.	senting contributions,	membership f	fees and other	
		n/a full-time employee of H	ławaiian Telcom.			
State tot	al amount e	xpended for lobbying by lo	bbyist.			
		0				
List resu	ilts of the le	gislation you sought to infl	uence.			
		resolution passed.				
Other in	formation.					
	certify that and correct.	the foregoing statements	Subscribed and sw This <u>ls+</u> day		me nr, 2017.	NUMBER OF AN ANT
5) (Signa		By <u>Bwonlin</u> Notary or any offic GWENDOLYN A My commission expire NITARY CERT	. MASSIAH es:FEB. 22	administer oaths	Contraction of the second seco
	() 0	,	NITHRY CERT	IFICHION 0	THE VEILUE	FUZE

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

Rev. 9/2016

INFORMATION ON THE ANNUAL REPORT FORM

Filing Date. Each lobbyist must file with the Honolulu Ethics Commission an annual report for the preceding calendar year ending December 31. The report is due January 10 of each year, or if the date falls on a Saturday or holiday, the next business day.

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Doc. Date: No Dave	# Pages:	2
Name: Gwenddyn A. Kassidh		Circuit
Doc. Description: C+C of HNL	Ethres	-
Commission Lobbyist Annu	I Report	-HTI
Burnh & Hass	. u	11/17
Signature / NOTARY CERTIFICA	TION	Date





3.

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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18 JAN 10 P7:14

ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Yoshimoto, Kimberley W.		521-5500
MAILING ADDRESS (Street)		FAX 541-9050
745 Fort Street Mall, 17th Floor		EMAIL kyoshimoto@imanaka-asato.com
(City) Honolulu	(State) _{HI}	(Zip Code) 96813
LOBBYIST FIRM/EMPLOYER (Fill In only i	f you are employed by a business enlity that has been retained to lobby}	TELEPHONE
Imanaka Asato, LLLC		521-9500
MAILING ADDRESS (No. and Street of 745 Fort Street Mali, 17th Floor	FAX	
		EMAIL
(City) Honolulu	(State) HI	(Zip Code) 96813

PART II ORGANIZATION				
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) TELEPHONE				
Avalon Development Company	587-7773			
MAILING ADDRESS (No. and Street or P.O Box) 800 Bethel Street, Suite 501		FAX		
		EMAIL		
(City) Honolulu	(State) HI	(Zip Code) 96813		

PART III EXPENDITURES, BY TYPE 3/22/18				
Political Contributions see https://deta.hawaii.gov/	Amount NIA apps/campaignspending	Receptions, Meals, Food & Beverages	Amount	
Preparation & Distribution of Lobbying Materials	Amount	Media Advertising	Amount	
Entertainment & Events	Amount	Other		
		TOTAL		
Rev 12/2017	Deadline: January NOTE: This is a	/ 10 th of Each Year public document	HONOLULU RECEIVED 3 - 28 - 18 ~ 8 MAR 28 P 1 :05	

Fees	Amount \$13,000.00
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	1
☐Business & Economic Development	Community Services	Customer Services	
Culture & Arts	□Housing	Public Works, Infrastructure & Sustainability	
Parks & Recreation	Dublic Health, Safety & Welfare	□Tourism	
□Transportation	⊠Zoning & Planning	Specific Legislation: Bill No. <u>15, 58, 59 (Year) 2017 に</u> Reso No(Year) Admin. Rule No Dept	53/22/18
Other (indicate below)			

LJOther (indicate below):

> PART VI POLICY MAKING PROCESS DECISIONS YOU SOUGHT TO INFLUENCE AND OUTCOME

¹ . Bills are still pending:	4
2.	5
3.	Check here if additional sheets are attached

PART VII LOBBYIST CER	TIFICATION
I hereby certify that the foregoing sta and correct. Kembury Wy LOBBYIST SIGNATURE 1818 DATE	tements are true Subscribed and sworn to before me This <u>8th</u> day of <u>January</u> , <u>2040</u> By: Charmaine Ross Chamber Rom Rom NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS ISF Growth, 2065. My commission expires: July 25, 2021
Rev 12/2017	Deadline: January 10 th of Each Year NOTE: This is a public document



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

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

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ETHICS COMMISSION RECEIVED			
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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST				
NAME (Last) (First) (Middle)		TELEPHONE		
Yoshimoto, Kimberley W.		521-5500		
MAILING ADDRESS (Street)		FAX 541-9050		
745 Fort Street Mall, 17th Floor		541-9050		
		EMAIL		
		kyoshimoto@imanaka-asato.com		
(City) Honolulu	(State) _{HI}	(Zip Code)		
		96813		
LOBBYIST FIRM/EMPLOYER (Fill in only if yo	are employed by a business entity that has been retained to lobby)	TELEPHONE		
Imanaka Asato, LLLC		521-9500		
MAILING ADDRESS (No. and Street or I	P.O Box)	FAX		
745 Fort Street Mall, 17th Floor				
		EMAIL		
(City) Honolulu	(State) HI	(Zip Code)		
		96813		

PART II ORGANIZATION			
NAME OF ORGANIZATION YO	TELEPHONE		
Haseko Development, Inc.	689-7772		
MAILING ADDRESS (No. and S	FAX		
91-1001 Kaimalie Street, Suite 205			
		EMAIL	
		dlum@haseko.com	
(City) Ewa Beach	(Zip Code)		
	(State) _{HI}	96706	

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-		

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 Services	Customer Services
□Culture & Arts	□Housing	□Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Safety & Welfare	□Tourism
□Transportation	□Zoning & Planning	□ Specific Legislation: 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 1818 DATE	Subscribed and sworn to before me This <u>St</u> day of <u>January</u> , <u>2010</u> . By: <u>Charmaine Ross</u> <u>MMMMMR</u> <u>NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS</u> Ist arcuit, 2pgs, Amue Peport My commission expires: <u>July 25, 2021</u>
	y 10 th of Each Year public document

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HONOLULU ETHICS COMMISSION

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

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

18 JAN 10 P7:14

ANNUAL REPORT

Lobbyist Annual Report

(Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Yoshimoto, Kimberley W.		521-5500
MAILING ADDRESS (Street) 745 Fort Street Mall, 17th Floor		FAX 541-9050
		EMAIL kyoshimoto@imanaka-asato.com
(City) Honolulu	(State) _{HI}	(Zip Code) 96813
LOBBYIST FIRM/EMPLOYER (FI	I in only if you are employed by a business entity that has been retained to lobby)	TELEPHONE
Imanaka Asato, LLLC		521-9500
MAILING ADDRESS (No. and St 745 Fort Street Mall, 17th Floor	reet or P.O Box)	FAX
		EMAIL
(City) Honolulu	(State) _{HI}	(Zip Code)
		96813

PART II ORGANIZA	ΓΙΟΝ	
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) TELEPHONE		TELEPHONE
Mana'olana Partners, LLC		310-806-4200
MAILING ADDRESS (No. and Street or P.O Box) 11111 Santa Monica Blvd., Suite 2250		FAX
		EMAIL
(City) Los Angeles	(State) _{CA}	(Zip Code) 90025

PART III EXPENDIT	URES, BY TYPE 🚛	18				
Political Contributions see https://data.hawaii.gov/	Amount NIA Fy apps/campaignspending	Receptions, Meals, Food & Beverages	Amount			
Preparation & Distribution of Lobbying Materials	Amount	Media Advertising	Amount			
Entertainment & Events	Amount	Other	-			
		TOTAL		8		ETH
Rev 12/2017	Deadline: January NOTE: This is a	/ 10 th of Each Year public document		MAR 28 P1:04	A 3.28.18 -	RECEIVED

Fees	Amount \$7,000.00
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 Services	Customer Services	
□Culture & Arts	□Housing	□Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Safety & Welfare	□Tourism	
□Transportation	⊠Zoning & Planning	Specific Legislation: Bill No(Year) Reso No. 221 (Year)2017 Admin. Rule No Dept	
Other (indicate below):			

PART VI POLICY MAKING PROCESS DECISIONS YOU SOUGHT TO INFLUENCE AND OUTCOME

3.	□ Check here if additional sheets are attached
2.	5.
^{1.} Passage of Resolution 17-221, adopted 9/06/17	4.

PART VII LOBBYIST CERTIF	CATION
I hereby certify that the foregoing statemer and correct. LOBBYIST SIGNATURE 1818 DATE	This Subscribed and sworn to before me This St day of Sanung, 2019 By: Charmaine Ross Charman Ross Notary or any official authorized to administer oaths Istarcuit, 2018, Annual Pupor My commission expires: July 25, 2021
	adline: January 10 th of Each Year OTE: This is a public document



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

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

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ANNUAL REPORT

Lobbyist Annual Report

(Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Yoshimoto, Kimberley W.		521-5500
MAILING ADDRESS (Street) 745 Fort Street Mall, 17th Floor		FAX 541-9050
		EMAIL kyoshimoto@imanaka-asato.com
(City) Honolulu	(State) _{HI}	(Zip Code) 96813
LOBBYIST FIRM/EMPLOYER (Fill in anily i	f you are employed by a business entity that has been relained to lobby)	TELEPHONE
Imanaka Asato, LLLC		521-9500
MAILING ADDRESS (No. and Street of 745 Fort Street Mail, 17th Floor	or P.O Box)	FAX
		EMAIL
(City) Honolulu	(State) HI	(Zip Code) 96813

PART II ORGANIZATION			
NAME OF ORGANIZATION	YOU LOBBY FOR (Do not abbreviate)	TELEPHONE	
PACREP, LLC		(310) 500-2955	
MAILING ADDRESS (No. and Street or P.O Box) 10880 Wilshire Blvd., Suite 2222		FAX	
		EMAIL	
(City) Los Angeles (State) CA		(Zip Code) 90024	

PART III EXPENDITURES, BY TYPE 3/22/18						
Political Contributions see https://data.hawaii.gov/	Amount NIA Fy apps/campaignspending	Receptions, Meals, Food & Beverages	Amount			
Preparation & Distribution of Lobbying Materials	Amount	Media Advertising	Amount			
Entertainment & Events	Amount	Other	- A			
•		TOTAL		8		m
Rev 12/2017	•	y 10 th of Each Year public document		MAR 28 P1:04	83.28.18 -	RECEIVED

Fees	Amount \$400.00
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 Services	Customer Services	
□Culture & Arts	□Housing	□Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Safety & Welfare	□Tourism	
Transportation	⊠Zoning & Planning	Specific Legislation: Bill No. 62 (Year) 2017 Reso No. (Year) Admin. Rule No. Dept.	
Other (indicate below):			

PART VI POLICY MAKING PROCESS DECISIONS YOU SOUGHT TO INFLUENCE AND OUTCOME

^{1.} Bill 62 approved by Mayor on 9/11/17	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	Subscribed and sworn to before me This <u>Sm</u> day of <u>January</u> , <u>2018</u> . By: <u>Charmaine Ross</u> (<u>Manuary</u> , <u>2018</u> . NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS ISF CIVICUIT, 2055, Annual Manuart My commission expires: July 25, 2021
-	y 10 th of Each Year public document



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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)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		TELEPHONE
Yoshimoto, Kimberley W.		521-5500
MAILING ADDRESS (Street)		FAX 541-9050
745 Fort Street Mall, 17th Floor		541-9050
		EMAIL
1011		kyoshimoto@imanaka-asato.com
(City) Honolulu	(State)	(Zip Code)
		96813
LOBBYIST FIRM/EMPLOYER (Fill in only if you are employed by a business entity that has been retained to lobby)		TELEPHONE
Imanaka Asato, LLLC		521-9500
MAILING ADDRESS (No. and S	Street or P.O Box)	FAX
745 Fort Street Mail, 17th Floor		
		EMAIL
(City) Honolulu	(State)	(Zip Code)
		96813

PART II ORGANIZATION		
NAME OF ORGANIZATIO	ON YOU LOBBY FOR (Do not abbreviate)	TELEPHONE
Verizon Communications		925-279-6209
MAILING ADDRESS (No. and Street or P.O Box) 15505 Sand Canyon Avenue		FAX
		EMAIL
(City) Irvine	(State) _{CA}	(Zip Code) 92618

PART III EXPENDITURES, BY TYPE 3/22/18					
Political Contributions see https://data.hawaii.gov/	Amount NIA Ky	Receptions, Meals, Food & Beverages	Amount		
Preparation & Distribution of Lobbying Materials	Amount	Media Advertising	Amount		
Entertainment & Events	Amount	Other			
		TOTAL		81	ETT
Rev 12/2017		y 10 th of Each Year public document		MAR 28 P1:04	RECEIVED RECEIVED

Fees	Amount \$6,000.00
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 Services	Customer Services	
□Culture & Arts	□Housing	Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Safety & Welfare	□Tourism	
□Transportation	⊠Zoning & Planning	□ Specific Legislation: 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

3.	□ Check here if additional sheets are attached
2.	5.
¹ . Passage of House Bill 625, measure deferred	4.

PART VII LOBBYIST CERTIFICATION	
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE	Subscribed and sworn to before me This <u>SM</u> day of <u>VANUAN</u> , <u>2018</u> . By: <u>Charmaine Ross</u> <u>CMAMUAN</u> <u>PM</u> NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS ST CIrcuit, 2PSS, Annual Proposition My commission expires: July 25, 2021
	v 10 th of Each Year public document



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

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

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

NAME (Last) (First) (Middle)		TELEPHONE	
ZIRBEL, LAUREN, SUZANNE	808-294-9968		
	MAILING ADDRESS (Street)		
P.O. BOX 1739		FAX	
		EMAIL	
(City)		laurenzirbel@gmail.com	
(City) KAILUA	(State) HAWAII	(Zip Code)	
	Fill in only if you are employed by a business entity that has been retained to lobby)	96734	
SZ CONSULTING LLC		TELEPHONE	
MAILING ADDRESS (No. and S	Street or P.O Box)	FAX	
P.O. BOX 1739		FAX	
		EMAIL	
(City) KAILUA	(State) HAWAII		
IVAILUA	HAWAII	(Zip Code)	

NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) HAWAII FOOD INDUSTRY ASSOCIAITON		TELEPHONE
MAILING ADDRESS (No. and Street or P.O Box) 1050 BISHOP ST., PMB 235		FAX
(City)		EMAIL info@hawalifood.com
(City) HONOLULU	(State) HAWAII	(Zip Code) 96813

PART III EXPENDI	TURES, BY TYPE		
Political Contributions Preparation & Distribution of Lobbying Materials Entertainment & Events	Amount 500	Receptions, Meals, Food & Beverages Media Advertising Other	Amount 0 Amount 0
		TOTAL 500	

Rev. 12/2017

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

Fees	Amount
Compensation	Amount \$3000.00
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 Services	Customer Services		
Culture & Arts		□Public Works, Infrastructure & Sustainability		
Parks & Recreation	□Public Health, Safety & Welfare	□Tourism		
□Transportation	□Zoning & Planning	□ Specific Legislation: 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

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2. BILL 71 - CONTAINER BAN - OPPOSE

4. BILL 108 - LITTER REDUCTION - SUPPORT (17)

3. BILL 9 - FOOD WASTE MANDATE - OPPOSE/ COMMEN Check here if additional sheets are attached

5.

PART VII LOBBYIST CERTIFICATION

and correct.	day of <u>AMURY</u> , <u>2018</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u> <u>AMULIS</u>
Rev. 12/2017 NO. 98-546 NO. 98-546 NOTE: This is a public NO. 98-546	Doc. Date: 1-8-18 # Pages 2 of Each YearNotary Name: Phyllis A. Bueno First Circuit ic document Doc. Description Annual upper Multis Afreno 1-8-18 Notary Signature Dots