



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

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

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HONOLULU
 ETHICS COMMISSION
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21-14-19

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2019 REGISTRATION

Lobbyist Registration
 (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle) Caballero, Mateo		
LOBBYIST FIRM/EMPLOYER (if applicable) American Civil Liberties Union of Hawaii Foundation		TELEPHONE 808 522 5908
MAILING ADDRESS (No. and Street or P.O. Box) P.O. Box 3410		FAX 808 522 5909
		EMAIL mcaballero@acluhawaii.org
(City) Honolulu	(State) Hawaii	(Zip Code) 96801

PART II.A ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) American Civil Liberties Union of Hawaii Foundation		TELEPHONE 808 522 5900
MAILING ADDRESS (No. and Street or P.O. Box) P.O. Box 3410		FAX 808 522 5909
		EMAIL office@acluhawaii.org
(City) Honolulu	(State) Hawaii	(Zip Code) 96801
ESTIMATED NUMBER OF MEMBERS (if lobbying on behalf of members)		<input checked="" type="checkbox"/> Not Applicable
METHODS USED BY MEMBERS TO MAKE POLICY DECISIONS		<input checked="" type="checkbox"/> Not Applicable

PART II.B NO LONGER LOBBYING	
<input type="checkbox"/> I am no longer authorized to lobby on behalf of the organization in Part II.A	DATE

PART III DESCRIPTION OF SUBJECTS ON WHICH YOU EXPECT TO LOBBY

<input type="checkbox"/> Business & Economic Development	<input type="checkbox"/> Community Services	<input type="checkbox"/> Customer Services
<input type="checkbox"/> Culture & Arts	<input type="checkbox"/> Housing	<input type="checkbox"/> Public Works, Infrastructure & Sustainability
<input type="checkbox"/> Parks & Recreation	<input type="checkbox"/> Public Health, Safety & Welfare	<input type="checkbox"/> Tourism
<input type="checkbox"/> Transportation	<input type="checkbox"/> Zoning & Planning	<input type="checkbox"/> Specific Legislation: <input type="checkbox"/> Additional Sheet(s) Attached Bill No. _____ (Year) _____ Reso No. _____ Admin. Rule No. _____ Dept. _____

Other (indicate below): **Civil Rights and Civil Liberties**

PART IV LOBBYIST CERTIFICATION

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

 *

 LOBBYIST SIGNATURE

1/09/19

 DATE

Subscribed and sworn to before me
 This ____ day of _____, _____.

By: * See attached notary page.

NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS

My commission expires:

PART V AUTHORIZATION TO LOBBY

NAME Joshua Wisch	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED Executive Director
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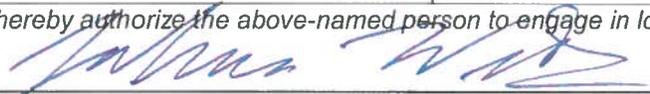
NAME OF ORGANIZATION (if applicable) American Civil Liberties Union of Hawaii Foundation	TELEPHONE 808 522 5903
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MAILING ADDRESS (No. and Street or P.O Box) P.O. Box 3410	FAX 808 522 5909
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EMAIL jwisch@acluhawaii.org

(City) Honolulu	(State) Hawaii	(Zip Code) 96801
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I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.



 (Signature of Authorizing Officer or Person Represented)

1/19/19

 (Date)

STATE OF HAWAII)
) SS.
CITY AND COUNTY OF HONOLULU)

The foregoing undated Honolulu Ethics Commission 2019 Lobbyist Registration consisting of two (2) pages was subscribed, sworn to, and acknowledged before me by MATEO CABALLERO in the First Circuit of the State of Hawaii on this 9th day of January, 2019.



Patrick Y. Taomae

PATRICK Y. TAOMAE

Notary Public, State of Hawaii

My Commission Expires: 6/30/2019