



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
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32-11-19

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2019 REGISTRATION

Lobbyist Registration
 (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle) Field, Laurie Ann		
LOBBYIST FIRM/EMPLOYER (if applicable) Planned Parenthood Votes Northwest and Hawaii		TELEPHONE 808.954.4736
MAILING ADDRESS (No. and Street or P.O. Box) 1350 S King Street, Ste. 309		FAX
		EMAIL laurie.field@ppvnh.org
(City) Honolulu	(State) HI	(Zip Code) 96814

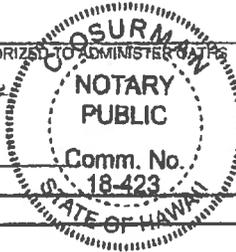
PART II.A ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) Planned Parenthood Votes Northwest and Hawaii		TELEPHONE 808.954.4736
MAILING ADDRESS (No. and Street or P.O. Box) 2001 East Madison St.		FAX
		EMAIL
(City) Seattle	(State) WA	(Zip Code) 98122
ESTIMATED NUMBER OF MEMBERS (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

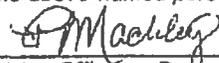
PART III DESCRIPTION OF SUBJECTS ON WHICH YOU EXPECT TO LOBBY

<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 checked="" 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. _____
<input type="checkbox"/> Other (indicate below):		

PART IV LOBBYIST CERTIFICATION

<p><i>I hereby certify that the foregoing statements are true and correct.</i></p> <p> _____ LOBBYIST SIGNATURE</p> <p>1/10/19 _____ DATE</p>	<p>Subscribed and sworn to before me</p> <p>This <u>10</u> day of <u>January</u>, 20<u>19</u></p> <p>By: <u>Laurie Field</u></p> <p></p> <p>NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS Notary Certification of <u>Hawaii</u> My commission expires: <u>C. Osurman</u> My Commission Expires: <u>July 22, 2022</u> Comm. No. <u>18-423</u></p>
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PART V AUTHORIZATION TO LOBBY

NAME Treasure Mackley		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED Vice President	
NAME OF ORGANIZATION (if applicable) Planned Parenthood Votes Northwest and Hawaii		TELEPHONE 206.861.7502	
MAILING ADDRESS (No. and Street or P.O. Box) 2001 East Madison St.		FAX	
		EMAIL treasure.mackley@ppvnh.org	
(City) Seattle	(State) WA	(Zip Code) 98122	
<p><i>I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.</i></p> <p> _____ (Signature of Authorizing Officer or Person Represented)</p> <p>1/10/2019 _____ (Date)</p>			

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NOTARY PUBLIC CERTIFICATION

Document Date: 1/10/2019 # pgs : 2
Notary Name: C. Osurman First Circuit
Doc. Description: Honolulu Ethics
Commission 2019 Registration
[Signature] 1/10/2019
Notary Signature Date

