



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

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

HONOLULU  
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 ETHICS COMMISSION  
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 31-7-19  
 '19 JAN -4 P 4 :00

## 2019 REGISTRATION

Lobbyist Registration  
 (Type or Print Clearly)

<b>PART I LOBBYIST</b>		
NAME (Last) (First) (Middle) FISHER, DUANE R.		
LOBBYIST FIRM/EMPLOYER (if applicable) STARN O'TOOLE MARCUS & FISHER		TELEPHONE (808) 537-6100
MAILING ADDRESS (No. and Street or P.O. Box) 733 BISHOP STREET, SUITE 1900		FAX (808) 537-5434
		EMAIL <a href="mailto:dfisher@starnlaw.com">dfisher@starnlaw.com</a>
(City) HONOLULU	(State) HAWAII	(Zip Code) 96813

<b>PART II.A ORGANIZATION</b>		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) HILTON		TELEPHONE (703) 883-1000
MAILING ADDRESS (No. and Street or P.O. Box) 7930 JONES BRANCH DRIVE		FAX
		EMAIL
(City) MCLEAN	(State) VIRGINIA	(Zip Code) 22102
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

<b>PART II.B NO LONGER LOBBYING</b>	
<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 checked="" 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 checked="" type="checkbox"/> Tourism
<input type="checkbox"/> Transportation	<input checked="" 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><u><i>Duane Bobb</i></u>                  LOBBYIST SIGNATURE</p> <p><u>12/31/18</u>                  DATE</p>	<p>Subscribed and sworn to before me</p> <p>This <u>31<sup>st</sup></u> day of <u>December</u>, 20<u>18</u>.</p> <p>By: <u><i>Benedette C. Lee</i></u>                  NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS</p> <p>My commission expires:  <u>6/29/2019</u></p>
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**PART V AUTHORIZATION TO LOBBY**

NAME ERICA GORDON		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED VICE PRESIDENT, GOVERNMENT AFFAIRS
NAME OF ORGANIZATION (if applicable) HILTON		TELEPHONE (703) 883-5382
MAILING ADDRESS (No. and Street or P.O Box) 7930 JONES BRANCH DRIVE		FAX
		EMAIL erica.gordon@hilton.com
(City) MCLEAN	(State) VIRGINIA	(Zip Code) 22102
<p><i>I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.</i></p> <p><u><i>Erica Gordon</i></u> <u>113119</u>                  (Signature of Authorizing Officer or Person Represented) (Date)</p>		





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31-14-19  
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## 2019 REGISTRATION

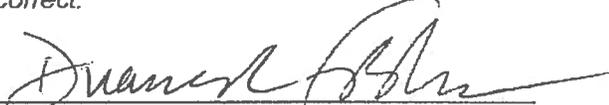
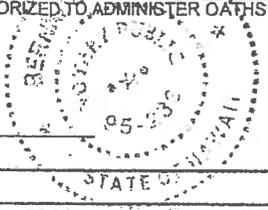
Lobbyist Registration  
 (Type or Print Clearly)

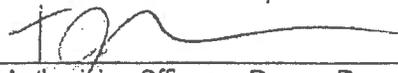
<b>PART I LOBBYIST</b>		
NAME (Last) (First) (Middle) FISHER, DUANE R.		
LOBBYIST FIRM/EMPLOYER (if applicable) STARN O'TOOLE MARCUS & FISHER		TELEPHONE (808) 537-6100
MAILING ADDRESS (No. and Street or P.O. Box) 733 BISHOP STREET, SUITE 1900		FAX (808) 537-5434
		EMAIL <a href="mailto:dfisher@starnlaw.com">dfisher@starnlaw.com</a>
(City) HONOLULU	(State) HAWAII	(Zip Code) 96813

<b>PART II.A ORGANIZATION</b>		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) PARK HOTELS & RESORTS INC.		TELEPHONE (571) 302-5757
MAILING ADDRESS (No. and Street or P.O. Box) 1775 TYSONS BLVD., 7TH FLOOR		FAX
		EMAIL
(City) TYSONS	(State) VIRGINIA	(Zip Code) 22102
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

<b>PART II.B NO LONGER LOBBYING</b>	
<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 checked="" 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 checked="" type="checkbox"/> Tourism
<input type="checkbox"/> Transportation	<input checked="" 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>12/31/18            DATE</p>	<p>Subscribed and sworn to before me</p> <p>This <u>31<sup>st</sup></u> day of <u>December</u>, <u>2018</u>.</p> <p>By:             NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS</p> <p>My commission expires:  <u>6/29/2019</u></p> 

PART V AUTHORIZATION TO LOBBY		
NAME THOMAS J. BALTIMORE, JR.	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED PRESIDENT & CEO	
NAME OF ORGANIZATION (if applicable) PARK HOTELS & RESORTS INC.	TELEPHONE (571) 302-5757	
MAILING ADDRESS (No. and Street or P.O Box) 1775 TYSONS BLVD., 7TH FLOOR	FAX	
	EMAIL	
(City) TYSONS	(State) VIRGINIA	(Zip Code) 22102
<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>1/6/19            (Date)</p>		

NOTARY CERTIFICATION STATEMENT

Doc. Date: 12-31-18       Undated at time of notarization

Document Description: Honolulu Ethics Commission - 2019  
Lobbyist Registration Form (Duane R. Fisher)

No. of Pages: 3

Jurisdiction: First Judicial Circuit  
Honolulu, Hawaii

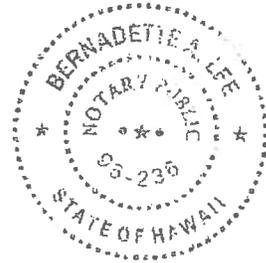
Bernadette A. Lee      12-31-18

Signature of Notary

Date of Notarization and  
Certification Statement

Bernadette A. Lee

Printed Name of Notary



(Official Stamp or Seal)



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'19 JAN -8 P12:37

## 2019 REGISTRATION

Lobbyist Registration  
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<b>PART I LOBBYIST</b>		
NAME (Last) (First) (Middle) FISHER, DUANE R.		
LOBBYIST FIRM/EMPLOYER (if applicable) STARN O'TOOLE MARCUS & FISHER		TELEPHONE (808) 537-6100
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(City) HONOLULU	(State) HAWAII	(Zip Code) 96813

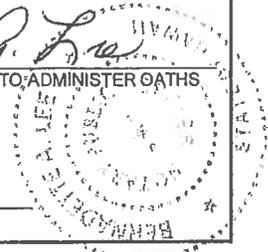
<b>PART II.A ORGANIZATION</b>		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) TURTLE BAY RESORT, LLC		TELEPHONE (808) 293-6000
MAILING ADDRESS (No. and Street or P.O. Box) 57-091 KAMEHAMEHA HIGHWAY		FAX
		EMAIL
(City) KAHUKU	(State) HAWAII	(Zip Code) 96731
ESTIMATED NUMBER OF MEMBERS (if lobbying on behalf of members)		<input checked="" type="checkbox"/> Not Applicable
METHODS USED BY MEMBERS TO MAKE POLICY DECISIONS		<input checked="" type="checkbox"/> Not Applicable

<b>PART II.B NO LONGER LOBBYING</b>	
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### PART V AUTHORIZATION TO LOBBY

NAME GERARD C. GIBSON		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED VICE PRESIDENT	
NAME OF ORGANIZATION (if applicable) TURTLE BAY RESORT, LLC		TELEPHONE (808) 293-6000	
MAILING ADDRESS (No. and Street or P.O. Box) 57-091 KAMEHAMEHA HIGHWAY		FAX	
		EMAIL	
(City) KAHUKU	(State) HAWAII	(Zip Code) 96731	
<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>1/5/19                  (Date)</p>			

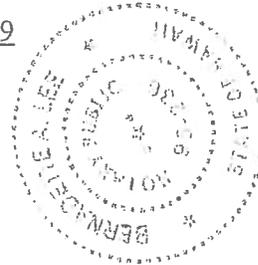
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Honolulu, Hawaii



Bernadette A. Lee 12-31-18  
Signature of Notary Date of Notarization and  
Certification Statement

Bernadette A. Lee (Official Stamp or Seal)  
Printed Name of Notary