



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

71.27.20

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2020 REGISTRATION

Lobbyist Registration
 (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle) Iriarte, Peter, Taisipic		
LOBBYIST FIRM/EMPLOYER (if applicable) Local 630, O.P.C.M.I.A	TELEPHONE (808) 841-0491	
MAILING ADDRESS (No. and Street or P.O. Box) 2251 North School Street	FAX	
	EMAIL <i>masonplaster@hotmail.com</i>	
(City) Honolulu	(State) HI	(Zip Code) 96819 <i>per Tryson Hook 2-20-2020</i>

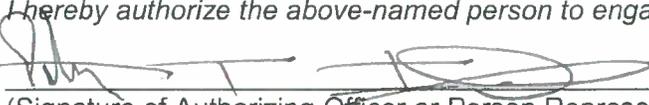
PART II.A ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) Operative Plasterers' & Cement Masons'		TELEPHONE (808) 841-0491
MAILING ADDRESS (No. and Street or P.O. Box) 2251 North School St	FAX	
	EMAIL <i>masonplaster@hotmail.com</i>	
(City) Honolulu	(State) HI	(Zip Code) 96819
ESTIMATED NUMBER OF MEMBERS (if lobbying on behalf of members) 900 <input type="checkbox"/> Not Applicable		
METHODS USED BY MEMBERS TO MAKE POLICY DECISIONS <i>Executive Board per telcon w/ Tryson Hook 1-15-2020</i> <input type="checkbox"/> Not Applicable		

*Local 630
OPCMIA*

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 checked="" type="checkbox"/> Business & Economic Development	<input checked="" type="checkbox"/> Community Services	<input checked="" type="checkbox"/> Customer Services
<input checked="" type="checkbox"/> Culture & Arts	<input checked="" type="checkbox"/> Housing	<input checked="" type="checkbox"/> Public Works, Infrastructure & Sustainability
<input type="checkbox"/> Parks & Recreation	<input checked="" type="checkbox"/> Public Health, Safety & Welfare	<input checked="" type="checkbox"/> Tourism
<input checked="" 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	
<i>I hereby certify that the foregoing statements are true and correct.</i>  LOBBYIST SIGNATURE 1/6/2020 DATE	Subscribed and sworn to before me This <u>6</u> day of <u>January</u> , 2020. By:  NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS My commission expires: <u>May 12, 2023</u> 

PART V AUTHORIZATION TO LOBBY		
NAME Peter T. Iriarte	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED Business Manager/Financial Secretary-Treasurer	
NAME OF ORGANIZATION (if applicable) Local #630 O.P.C.M.I.A.	TELEPHONE (808) 841-0491	
MAILING ADDRESS (No. and Street or P.O. Box) 2251 N, School St	FAX (808) 847-4782	
	EMAIL	
(City) Honolulu	(State) HI	(Zip Code) 96819
<i>I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.</i>		
 (Signature of Authorizing Officer or Person Represented)		1/6/2020 (Date)