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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2019 REGISTRATION

Lobbyist Registration
(Type or Print Clearly)

PART I LOBBYIST

NAME (Last) (First) (Middle) Lopez, Kealii S.		
LOBBYIST FIRM/EMPLOYER (if applicable) Dentons US LLP		TELEPHONE (808) 524-1800
MAILING ADDRESS (No. and Street or P.O Box) 1001 Bishop Street, ASB Tower, 18th Floor		FAX (808) 524-4591 EMAIL kealii.lopez@dentons.com
(City) Honolulu	(State) Hawaii	(Zip Code) 96813

PART II.A ORGANIZATION

NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) Expedia Group		TELEPHONE
MAILING ADDRESS (No. and Street or P.O. Box) 333 108th Avenue NE		FAX EMAIL
(City) Bellevue	(State) Washington	(Zip Code) 98004
ESTIMATED NUMBER OF MEMBERS (if lobbying on behalf of members)		☒ Not Applicable
METHODS USED BY MEMBERS TO MAKE POLICY DECISIONS		☒ Not Applicable

PART II.B NO LONGER LOBBYING

☒ I am no longer authorized to lobby on behalf of the organization in Part II.A	DATE 8/9/2019

NOTE: This is a public document.

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PART III DESCRIPTION OF SUBJECTS ON WHICH YOU EXPECT TO LOBBY

☐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: ☐Additional Sheet(s) Attached Bill No. 86 & 89 (Year) 2019 Reso No. Admin. Rule No. Dept.
☐Other (indicate below):		

PART IV LOBBYIST CERTIFICATION

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

LOBBYIST SIGNATURE

AUG - 8 2019

DATE

Subscribed and sworn to before me

This 8th day of August, 2019.

By:

NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS

JEAN H. YANAGAWA, NOTARY PUBLIC, STATE OF HAWAII

My commission expires: 2/7/2021

JEAN H. YANAGAWA NOTARY PUBLIC No. 85-37 STATE OF HAWAII

PART V AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
NAME OF ORGANIZATION (if applicable)		TELEPHONE
MAILING ADDRESS (No. and Street or P.O Box)		FAX
		EMAIL
(City)	(State)	(Zip Code)

I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.

(Signature of Authorizing Officer or Person Represented)

(Date) AUG - 8 2019

Rev. 11/2018

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JEAN H. YANAGAWA NOTARY PUBLIC No. 85-37 STATE OF HAWAII

Honolulu Ethics Commission 2019 Registration
Lobbyist Registration

AUG - 8 2019

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