

**CITY AND COUNTY OF HONOLULU
ETHICS COMMISSION
LOBBYIST ANNUAL REPORT FORM**

**HONOLULU
ETHICS COMMISSION
RECEIVED**

Name	<u>Hamasaki</u>	<u>Peter</u>	<u>James</u>
	(Print)	Last	First Middle
Business Address	<u>McCorriston Miller Mukai MacKinnon LLC</u> <u>500 Ala Moana Blvd., 5 Waterfront Plaza, #400</u> <u>Honolulu, Hawaii 96813</u>		<u>17 JAN 11 P4 57</u>
	(Street, City, State, Zip Code)		Phone <u>808-529-7300</u>
Email Address:	<u>hamasaki@m4law.com</u>		
State name and address of organization you lobbied for.			
<u>Charley's Taxi Radio Dispatch Corp.</u> <u>1451 S. King Street, Suite 300</u> <u>Honolulu, Hawaii 96814</u>			
State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities.			
<u>\$5,598.16</u>			
State total amount expended for lobbying by lobbyist.			
<u>\$0</u>			
List results of the legislation you sought to influence.			
<u>Bill 85 (15) - deferred</u>			
<u>Bill 36 (16) - enacted as Order No. 16-25</u>			
<u>Bill 55 (16) - enacted as Order No. 16-38</u>			
<u>Bill 56 (16) - pending</u>			
Other information.			
<u></u>			
<p>I hereby certify that the foregoing statements are true and correct.</p> <p align="center"><u><i>[Signature]</i></u> (Signature)</p>	<p>Subscribed and sworn to before me</p> <p>This <u>9th</u> day of <u>January</u>, 20<u>17</u>.</p> <p>By <u>Christine D. Kempczenski</u> Notary or any official authorized to administer oaths</p> <p>My commission expires: <u>11/03/2017</u></p>		

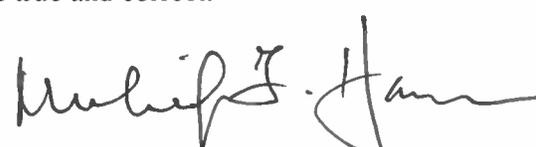


DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

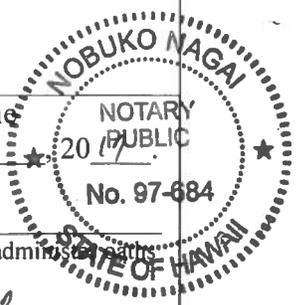
(See back of this form for information.)

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**CITY AND COUNTY OF HONOLULU
ETHICS COMMISSION
LOBBYIST ANNUAL REPORT FORM**

Name	<u>Hannemann</u>	<u>Muliufi</u>	<u>F</u>
	<small>(Print) Last</small>	<small>First</small>	<small>Middle</small>
Business Address	<u>2270 Kalakaua Ave. Ste. 1702, Honolulu, HI, 96815</u>		Phone <u>(808) 923-0407</u>
	<small>(Street, City, State, Zip Code)</small>		
Email Address:	<u>mhannemann@hawaiilodging.org</u>		
State name and address of organization you lobbied for.			
Hawaii Lodging & Tourism Association 2270 Kalakaua Ave. Ste 1702 Honolulu, HI, 96815			
State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities.			
10% of annual salary: est. \$18,000			
State total amount expended for lobbying by lobbyist.			
Political Contributions in form of Campaign contributions: \$5,450			
List results of the legislation you sought to influence.			
Development: Resolution 16-155, regarding the Ritz-Carlton: Support - Adopted Resolution No. 16-172 –Approving a Conceptual Plan for an Interim Planned Development-Transit Project for the Development of the Mana’olana Place Hotel and Residential Condominium Development Project: Support - Adopted			
Other information.			
I hereby certify that the foregoing statements are true and correct.		Subscribed and sworn to before me	
 _____ (Signature)		This <u>9</u> day of <u>January</u> , 20 <u>17</u>	
		By <u>Nobuko Nagai</u>	
		Notary or any official authorized to administer oaths	
		My commission expires: <u>12/14/2019</u>	
		Notary Public, <u>State of Hawaii</u>	
		My commission expires: <u>12/14/2019</u>	

17 JAN 10 P 3:21
 HONOLULU
 ETHICS COMMISSION
 RECEIVED



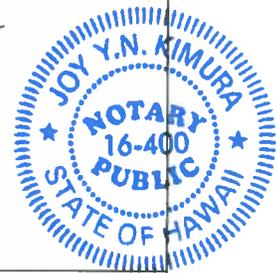
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**CITY AND COUNTY OF HONOLULU
ETHICS COMMISSION
LOBBYIST ANNUAL REPORT FORM**

HONOLULU
ETHICS COMMISSION
RECEIVED

Name <u>Hayashi</u> <u>Clyde</u> <u>T.</u> (Print) Last First Middle		96817 MA 17	JAN 10 P3:18
Business Address <u>650 Iwilei Road #285, Honolulu, HI</u> (Street, City, State, Zip Code)		Phone <u>(808) 845-3238 x1</u>	
Email Address: <u>chayashi@hawaiilecet.org</u>			
State name and address of organization you lobbied for. <u>Hawaii Laborers - Employers Cooperation and Education Trust (LECET)</u> <u>650 Iwilei Road, #285, Honolulu, HI 96817</u>			
State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities. <u>0</u>			
State total amount expended for lobbying by lobbyist <u>\$ 500.00</u>		Doc. Date: <u>1-10-17</u> # Pages: <u>1</u> Notary Name: <u>Joy Y.N. Kimura</u> <u>1st Circuit</u> Doc. Description: <u>City & County of Honolulu</u> <u>Ethics Commission Lobbyist Annual Report Form</u> <u>Joy Y.N. Kimura</u> <u>1-10-17</u> Notary Signature Date NOTARY CERTIFICATION	
List results of the legislation you sought to influence. <u>Bill 14 CDI Executive Operating Budget</u> <u>Bill 15 CDI Executive Capital Budget and programs</u> <u>2016 / SDD-19 (JY) Application for a Planned Development</u> Other information.			
I hereby certify that the foregoing statements are true and correct. <u>[Signature]</u> (Signature)		Subscribed and sworn to before me This <u>10th</u> day of <u>January</u> , 20 <u>17</u> . By <u>Joy Y.N. Kimura</u> <u>Joy Y.N. Kimura</u> Notary or any official authorized to administer oaths My commission expires: <u>11/20/2020</u>	



DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

(See back of this form for information.)

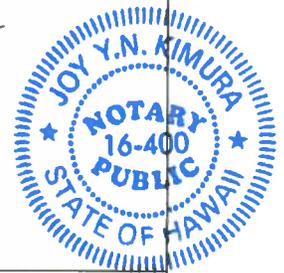
PLEASE RETAIN A COPY FOR YOUR RECORDS

031.13.17

**CITY AND COUNTY OF HONOLULU
ETHICS COMMISSION
LOBBYIST ANNUAL REPORT FORM**

HONOLULU
ETHICS COMMISSION
RECEIVED

Name <u>Hayashi</u> <u>Clyde</u> <u>T.</u> (Print) Last First Middle		96817 MA 17	JAN 10 P3:18
Business Address <u>650 Iwilei Road #285, Honolulu, HI</u> (Street, City, State, Zip Code)		Phone <u>(808) 845-3238 x1</u>	
Email Address: <u>chayashi@hawaiilecet.org</u>			
State name and address of organization you lobbied for. <u>Hawaii Laborers - Employers Cooperation and Education Trust (LECET)</u> <u>650 Iwilei Road, #285, Honolulu, HI 96817</u>			
State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities. <u>0</u>			
State total amount expended for lobbying by lobbyist <u>\$ 500.00</u>		Doc. Date: <u>1-10-17</u> # Pages: <u>1</u> Notary Name: <u>Joy Y.N. Kimura</u> <u>1st Circuit</u> Doc. Description: <u>City & County of Honolulu</u> <u>Ethics Commission Lobbyist Annual Report Form</u> <u>Joy Y.N. Kimura</u> <u>1-10-17</u> Notary Signature Date NOTARY CERTIFICATION	
List results of the legislation you sought to influence. <u>Bill 14 CDI Executive Operating Budget</u> <u>Bill 15 CDI Executive Capital Budget and programs</u> <u>8016 / SDD-19 (JY) Application for a Planned Development</u> Other information.			
I hereby certify that the foregoing statements are true and correct. <u>[Signature]</u> (Signature)		Subscribed and sworn to before me This <u>10th</u> day of <u>January</u> , 20 <u>17</u> . By <u>Joy Y.N. Kimura</u> <u>Joy Y.N. Kimura</u> Notary or any official authorized to administer oaths My commission expires: <u>11/20/2020</u>	



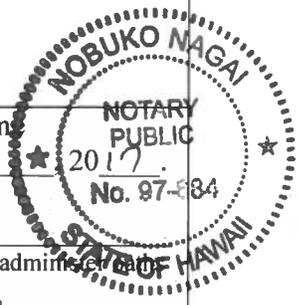
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PLEASE RETAIN A COPY FOR YOUR RECORDS

**CITY AND COUNTY OF HONOLULU
ETHICS COMMISSION
LOBBYIST ANNUAL REPORT FORM**

Name	Higashi	Jared	S
	(Print) Last	First	Middle
Business Address	2270 Kalakaua Ave. Ste. 1702, Honolulu, HI, 96815		Phone (808) 923-0407
	(Street, City, State, Zip Code)		
Email Address:	jhigashi@hawaiilodging.org		
State name and address of organization you lobbied for.			
Hawaii Lodging & Tourism Association 2270 Kalakaua Ave. Ste 1702 Honolulu, HI, 96815			
State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities.			
5% of annual Salary: est: \$2,625			
State total amount expended for lobbying by lobbyist.			
Political Contributions in form of Campaign Contributions: \$5,450			
List results of the legislation you sought to influence.			
Development: Resolution 16-155, regarding the Ritz-Carlton: Support - Adopted			
Resolution No. 16-172 –Approving a Conceptual Plan for an Interim Planned Development-Transit Project for the Development of the Mana'olana Place Hotel and Residential Condominium Development Project: Support - Adopted			
Other information.			
I hereby certify that the foregoing statements are true and correct.		Subscribed and sworn to before me	
 _____ (Signature)		This <u>9</u> day of <u>January</u> 20 <u>17</u> .	
		By <u>Nobuko Nagai</u> Notary or any official authorized to administer oaths	
		My commission expires: <u>12/16/2017</u>	

HONOLULU
ETHICS COMMISSION
RECEIVED
17 JAN 10 P 3:21



DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

(See back of this form for information.)

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031.13.17

**CITY AND COUNTY OF HONOLULU
ETHICS COMMISSION
LOBBYIST ANNUAL REPORT FORM**

Name Hiraki Kenneth T.
 (Print) Last First Middle

Business Address 1177 Bishop Street, Honolulu, HI 96813 Phone 546-7334
 (Street, City, State, Zip Code)

Email Address: ken.hiraki@hawaiiantel.com

State name and address of organization you lobbied for.
 Hawaiian Telcom, Inc.
 1177 Bishop Street
 Honolulu, HI 96813

State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities.
 0

State total amount expended for lobbying by lobbyist.
 0

List results of the legislation you sought to influence.
 0

Other information.

7 JAN 10 PIZ
 HONOLULU
 ETHICS COMMISSION
 RECEIVED

I hereby certify that the foregoing statements are true and correct. _____ (Signature)	Subscribe and sworn before me This day of <u>Jan</u> , 20 <u>1</u> By <u>Elaine R. Perry</u> ELAINE R. PERRY Notary or any official orized to administer oaths My commission expires: <u>Sept. 5, 2020</u> <u>in the Kingdom of Hawaii</u>
--	--

DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

(See back of this form for information.)
 PLEASE RETAIN A COPY FOR YOUR RECORDS

**CITY AND COUNTY OF HONOLULU
ETHICS COMMISSION
LOBBYIST ANNUAL REPORT FORM**

Name Hiraki Kenneth T.
(Print) Last First Middle

Business Address 1177 Bishop Street, Honolulu, HI 96813 Phone 546-7334
(Street, City, State, Zip Code)

Email Address: ken.hiraki@hawaiiantel.com

State name and address of organization you lobbied for.

Hawaiian Telcom Services Company, Inc.
 1177 Bishop Street
 Honolulu, HI 96813

State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities.

0

State total amount expended for lobbying by lobbyist.

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ETHICS COMMISSION
 PUBLIC RECORDS
 DIVISION

List results of the legislation you sought to influence.

0

Other information.

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



 (Signature)

Subscribed and sworn to before me

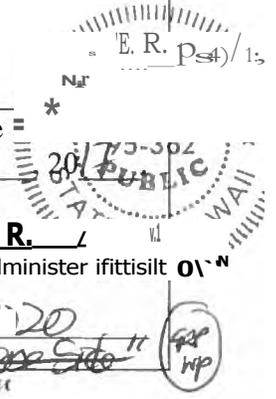
This 9th day of January 2017

By ELAINE R.

Notary or any official authorized to administer oaths

My commission expires: Sept 5, 2020

Notary Certification on Reverse Side Attached



I DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

(See back of this form for information.)

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**CITY AND COUNTY OF HONOLULU
ETHICS COMMISSION
LOBBYIST ANNUAL REPORT FORM**

Name Hiraki Kenneth T.
(Print) Last First Middle

Business Address 1177 Bishop Street, Honolulu, HI 96813 Phone 546-7334
(Street, City, State, Zip Code)

Email Address: ken.hiraki@hawaiiantel.com

State name and address of organization you lobbied for.

Hawaiian Telcom Communications, Inc.
 1177 Bishop Street
 Honolulu, HI 96813

State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities.

0

State total amount expended for lobbying by lobbyist.

0

List results of the legislation you sought to influence.

0

Other information.

JAN 10 17
 17 JAN 10 P12:41
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I hereby certify that the foregoing statements are true and correct.


 (Signature)

Subscribed and sworn to before me
 This 9th day of January, 2017.

By  **ELAINE R. PERRY**
 Notary or any official authorized to administer oaths

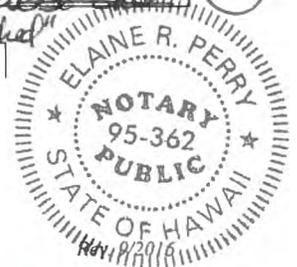
My commission expires: Sept. 5, 2020
 "Notary Certification ~~Renewed State~~ Attached"



DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

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097.13.17

**CITY AND COUNTY OF HONOLULU
ETHICS COMMISSION
LOBBYIST ANNUAL REPORT FORM**

HONOLULU
ETHICS COMMISSION
RECEIVED

Name _____
(Print) Last First Middle

Business Address The Trust for Public Land
1003 Bishop St., Suite 740, Hon, HI 96813 Phone 524-8563
(Street, City, State, Zip Code)

Email Address: lea.hong@tpl.org

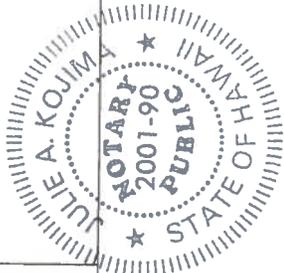
State name and address of organization you lobbied for.
The Trust for Public Land
1003 Bishop St., Suite 740
Honolulu, HI 96813

State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities.
\$ 724.00

State total amount expended for lobbying by lobbyist.
\$ 0

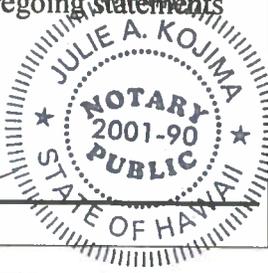
List results of the legislation you sought to influence.
Charter Amendment II, Budget - Clean Water & Natural Lands projects

Other information.



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

Lea Hong
 (Signature)



Subscribed and sworn to before me
 This 12TH day of JANUARY, 2017.

By Julie
 Notary or any official authorized to administer oaths
 Julie A. Kojima

My commission expires: APR 01 2017

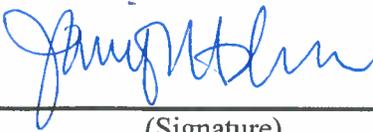
Pages: 1 Circuit None
 Name: Julie A. Kojima
 Doc. Description: LOBBYIST ANNUAL REPORT FORM
 Date: JAN 17 2017
 Signature: _____
 Date: _____
 NOTARY CERTIFICATION

DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

(See back of this form for information.)

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CITY AND COUNTY OF HONOLULU
ETHICS COMMISSION
LOBBYIST ANNUAL REPORT FORM

Name	Hudson	Jennifer		
(Print)	Last	First	Middle	
Business Address	91-056 Hanua Street, Kapolei, HI 96707		Phone	503 (808) 708-9714
(Street, City, State, Zip Code)				
Email Address:	jHUDSON@schn.com			
State name and address of organization you lobbied for.				
Schnitzer Steel Hawaii Corp, 91-056 Hanua Street, Kapolei, HI 96707				
State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities.				
\$1440.00				
State total amount expended for lobbying by lobbyist.				
0				
List results of the legislation you sought to influence.				
Bill 61 - passed.				
Other information.				
I hereby certify that the foregoing statements are true and correct.		Subscribed and sworn to before me		
		This 6 day of January, 2017.		
(Signature)		By 		
		Notary or any official authorized to administer oaths		
		My commission expires: June 3, 2017		

HONOLULU
ETHICS COMMISSION
RECEIVED
17 JAN 10 P 1:08

OFFICIAL SEAL
KARMA MC DOWELL
NOTARY PUBLIC - OREGON
COMMISSION NO. 478611
MY COMMISSION EXPIRES JUNE 03, 2017

DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

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91-11-17

CITY AND COUNTY OF HONOLULU
ETHICS COMMISSION
LOBBYIST ANNUAL REPORT FORM

Name Hughes Brian
(Print) Last First Middle

Business Address 1733 Ocean Avenue, 2nd Floor, Santa Monica, CA 90405 Phone 808-436-1854
(Street, City, State, Zip Code)

Email Address: bhughes@uber.com

State name and address of organization you lobbied for.

Uber Technologies, Inc
1455 Market Street, Suite 400
San Francisco, CA 94103

State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities.

\$3,000

State total amount expended for lobbying by lobbyist.

\$400

List results of the legislation you sought to influence.

Passage of Honolulu City & County Bill for Ordinance 55
Passage of Honolulu City & County Bill for Ordinance 36
Passage of HB260 at state level.

Other information.

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


(Signature)

Subscribed and sworn to before me

This 6th day of Jan, 2017.

By Brian Hughes
Notary or any official authorized to administer oaths

My commission expires: April 20th 2018
See Attachment

17 JAN -9 P12:15

HONOLULU
ETHICS COMMISSION
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DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

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Rev. 9/2016

01-11-17

JURAT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

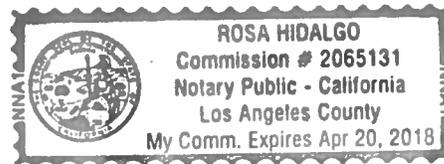
State of California

County of Los Angeles

Subscribed and sworn to (or affirmed) before me on this 6th day of Jan,
2017 by Brian Hughes

proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

Signature [Handwritten Signature] (Seal)



OPTIONAL INFORMATION

DESCRIPTION OF THE ATTACHED DOCUMENT

Lobbyist Annual report form
(Title or description of attached document)

(Title or description of attached document continued)

Number of Pages 1 Document Date _____

Additional information

INSTRUCTIONS

The wording of all Jurats completed in California after January 1, 2015 must be in the form as set forth within this Jurat. There are no exceptions. If a Jurat to be completed does not follow this form, the notary must correct the verbiage by using a jurat stamp containing the correct wording or attaching a separate jurat form such as this one with does contain the proper wording. In addition, the notary must require an oath or affirmation from the document signer regarding the truthfulness of the contents of the document. The document must be signed AFTER the oath or affirmation. If the document was previously signed, it must be re-signed in front of the notary public during the jurat process.

- State and county information must be the state and county where the document signer(s) personally appeared before the notary public.
- Date of notarization must be the date the signer(s) personally appeared which must also be the same date the jurat process is completed.
- Print the name(s) of the document signer(s) who personally appear at the time of notarization.
- Signature of the notary public must match the signature on file with the office of the county clerk.
- The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different jurat form.
 - ❖ Additional information is not required but could help to ensure this jurat is not misused or attached to a different document.
 - ❖ Indicate title or type of attached document, number of pages and date.
- Securely attach this document to the signed document with a staple.

**CITY AND COUNTY OF HONOLULU
ETHICS COMMISSION
LOBBYIST ANNUAL REPORT FORM**

Name losua, Michael L.
(Print) Last First Middle

Business Address 745 Fort Street Mall, 17th Floor Phone 521-9500
(Street, City, State, Zip Code)

Email Address: miosua@imanaka-asato.com

State name and address of organization you lobbied for.

Haseko Development, Inc.
 91-1001 Kaimalie Street, Suite 205
 Ewa Beach, HI 96706

State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities.

None

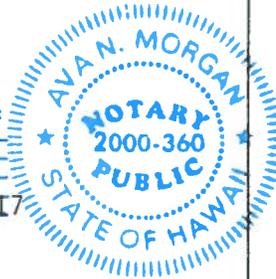
State total amount expended for lobbying by lobbyist. None

List results of the legislation you sought to influence.

Passage of Bills 62 and 63 and Resolution 16-180.

Other information.

NOTARY CERTIFICATION First Circuit
 Date of Doc.: NA No. of Pages: 1
 Doc. Description: Lobbyist
Annual Report Form
 Name: Ava N. Morgan Date: 1/6/17



HONOLULU
ETHICS COMMISSION
RECEIVED

17 JAN -9 AM 1:42

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

[Handwritten Signature]

(Signature)

Subscribed and sworn to before me

This 6th day of January, 2017.

By Ava N. Morgan *[Signature]*
 Notary or any official authorized to administer oaths

My commission expires: 07/23/2020

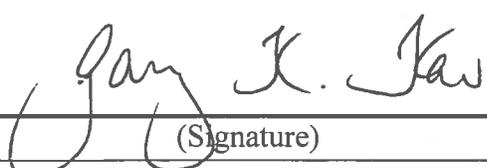
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21-11-17

**CITY AND COUNTY OF HONOLULU
ETHICS COMMISSION
LOBBYIST ANNUAL REPORT FORM**

Name	Kai	Gary	K.
	(Print) Last	First	Middle
Business Address	1003 Bishop Street, Suite 263, Hon. HI. 96822		Phone 808-532-2244
	<small>(Street, City, State, Zip Code)</small>		
Email Address:	HIBR@aol.com		
State name and address of organization you lobbied for.			
Hawaii Business Roundtable 1003 Bishop Street, Suite 2630 Honolulu, Hawaii 96813			
State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities.			
\$0			
State total amount expended for lobbying by lobbyist.			
\$0			
List results of the legislation you sought to influence.			
N/A			
Other information.			
<p align="center">NOTARY PUBLIC CERTIFICATION</p> <p>Susan N. Harada First Circuit Doc. Description <u>Lobbyist Annual Report Form</u> No. of Pages: <u>1</u> Date of Doc. <u>01/19/2017</u> <u>Susan N. Harada</u> <u>01/19/2017</u> Notary Signature Date</p>			
I hereby certify that the foregoing statements are true and correct. <div style="text-align:center; margin-top: 20px;">  _____ (Signature) </div>	Subscribed and sworn to before me This <u>19th</u> day of <u>January</u> , 20 <u>17</u> . By <u>Susan N. Harada</u> <u>Susan N. Harada</u> Notary or any official authorized to administer oaths My commission expires: <u>09/29/2017</u>		

'17 JAN 23 P 1:23
 HONOLULU ETHICS COMMISSION RECEIVED

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DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

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**CITY AND COUNTY OF HONOLULU
ETHICS COMMISSION
LOBBYIST ANNUAL REPORT FORM**

HONOLULU
ETHICS COMMISSION
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Name Kaimuloa Emi
(Print) Last First Middle

Business Address 999 Bishop St., Ste. 1250 96813 Phone 544-8340
(Street, City, State, Zip Code)

Email Address: ekaimuloa@wik.com

State name and address of organization you lobbied for.
Douglas Emmett management LLC
808 Wilshire Blvd., Ste. 200
Santa Monica, CA 90401-1889

State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities.
\$4,216

State total amount expended for lobbying by lobbyist.
\$0

List results of the legislation you sought to influence.
The bills did not pass.

Other information.

Doc. Date: undated # Pages: 1
 Cindy C. Uehara 1st Circuit
 Doc. Description: City Honolulu Ethics Comm.
Lobbyist Annual Report Form
Cindy Uehara DEC 28 2016
 Notary Signature Date
 NOTARY CERTIFICATION

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

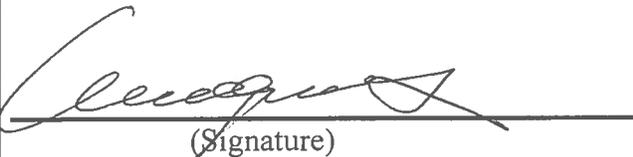
[Signature]
 (Signature)

Subscribed and sworn to before me
 This 28th day of December, 2016.
 By Cindy Uehara
 Notary or any official authorized to administer oaths
 My commission expires: 03/08/2019

DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

(See back of this form for information.)
 PLEASE RETAIN A COPY FOR YOUR RECORDS

**CITY AND COUNTY OF HONOLULU
ETHICS COMMISSION
LOBBYIST ANNUAL REPORT FORM**

Name _____ (Print)	Kaneko Last	William First	M. Middle
Business Address <u>1001 Bishop Street, Suite 1800, Honolulu, HI 96813</u> (Street, City, State, Zip Code)		Phone (808) <u>524-1800</u>	
State name and address of organization you lobbied for. car2go 1717 W. 6th Street, Suite 425 Austin, TX 78703			
State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities. \$0			
State total amount expended for lobbying by lobbyist. \$0			
List results of the legislation you sought to influence. None.			
Other information.			
I hereby certify that the foregoing statements are true and correct.		Subscribed and sworn to before me This <u>5th</u> day of <u>January</u> , 20 <u>17</u>	
 _____ (Signature)		By <u>Jo Ann Inouye</u> Notary or any official authorized to administer oaths Jo Ann Inouye My commission expires: <u>9/16/18</u>	

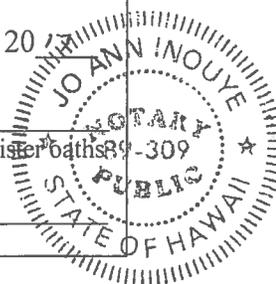
HONOLULU
ETHICS COMMISSION
RECEIVED
JAN -9 A7:48

DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

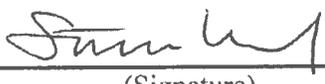
(See back of this form for information.)

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NOTARY CERTIFICATION First Circuit
 Date of Doc: 1/5/17 No. of Pages: 1
 Doc. Description: City of Honolulu Ethics
Commissioner Lobbyist Annual Rpt. Form
 Name: Jo Ann Inouye Date: 1/5/17



**CITY AND COUNTY OF HONOLULU
ETHICS COMMISSION
LOBBYIST ANNUAL REPORT FORM**

Name	Kelly	Stephen	H.
	(Print)	Last	First Middle
Business Address	1001 Kamokila Blvd., Suite 250; Kapolei, HI 96707		Phone (808) 674-3289
	(Street, City, State, Zip Code)		
Email Address:	stevek@kapolei.com		
State name and address of organization you lobbied for.			
James Campbell Corporation 1001 Kamokila Blvd., Suite 250 Kapolei, HI 96707			
State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities.			
\$0.00			
State total amount expended for lobbying by lobbyist.			
\$0.00			
List results of the legislation you sought to influence.			
NONE			
Other information.			
I hereby certify that the foregoing statements are true and correct.		Subscribed and sworn to before me	
 _____ (Signature)		This _____ day of _____, 20____.	
		By _____ Notary or any official authorized to administer oaths	
		My commission expires: _____	

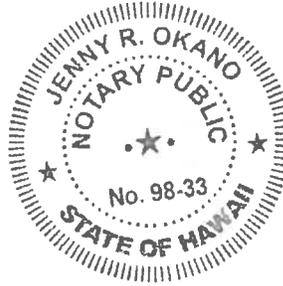
DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

(See back of this form for information.)

PLEASE RETAIN A COPY FOR YOUR RECORDS

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

Subscribed and sworn to before me
this 11th day of January, 2017



Jenny R. Okano
Name: Jenny R. Okano

Notary Public, State of Hawaii

My commission expires: 1/20/2018

Document Date: Undated at time of notarization No. of Pages: 2

Jenny R. Okano First Circuit

Document Description: City & County of Honolulu
Ethics Commission Lobbyist Annual Report Form

Jenny R. Okano 1/11/2017
Notary Signature Date



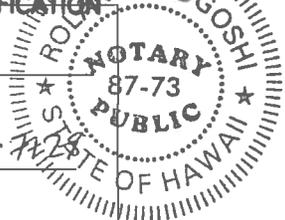
NOTARY CERTIFICATION

CITY AND COUNTY OF HONOLULU ETHICS COMMISSION LOBBYIST ANNUAL REPORT FORM

HONOLULU ETHICS COMMISSION RECEIVED

Signature: [Signature] Date: JAN 10 2017

NOTARY CERTIFICATION



Name: Kimura Jay Y.N. (Last, First, Middle) Business Address: 650 Iwikei Road, Suite 285, Hon. HI 96817 Phone: (808) 388-7228

Email Address: jkimura@hawaiilecet.org

State name and address of organization you lobbied for: Hawaii Laborers - Employers Cooperation and Education Trust (LECET), 650 Iwikei Road, Suite 285, Honolulu, HI 96817

State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities.

0

State total amount expended for lobbying by lobbyist.

0

List results of the legislation you sought to influence: Resolution 16-52 - PD-R for the Redevelopment of King's Village

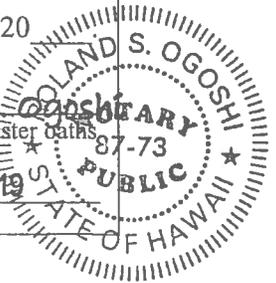
Other information.

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

[Signature] (Signature)

Subscribed and sworn to before me This day of JAN 10 2017, 20

By: Roland S. Ogoshi, Notary Public, First Judicial Circuit, State of Hawaii My commission expires: February 5, 2019



DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

(See back of this form for information.)

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**CITY AND COUNTY OF HONOLULU
ETHICS COMMISSION
LOBBYIST ANNUAL REPORT FORM**

Name Kodama Laura M
(Print) Last First Middle

Business Address 680 Iwilei Road, Box 510, Honolulu, HI 96817 Phone 548-4811
(Street, City, State, Zip Code)

Email Address: lkodama@castlecooke.com

State name and address of organization you lobbied for.

Castle & Cooke Homes Hawaii, Inc.
680 Iwilei Road, Box 510
Honolulu, HI 96817

State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities.

None

State total amount expended for lobbying by lobbyist.

None

List results of the legislation you sought to influence.

n/a

Other information.

n/a

HONOLULU
ETHICS COMMISSION
RECEIVED

17 JAN -9 AM 1:44

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

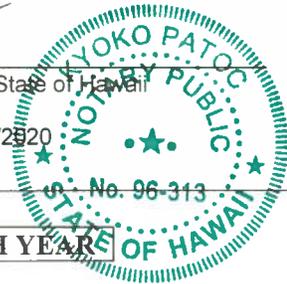


(Signature)

This 1-page undated Lobbyist Annual Report Form was subscribed and sworn to before me this 5th day of

January, 2017

Kyoko Patoc, Notary Public, State of Hawaii
 First Judicial Circuit
 My commission expires: 6/14/2020



DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

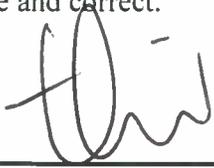
(See back of this form for information.)

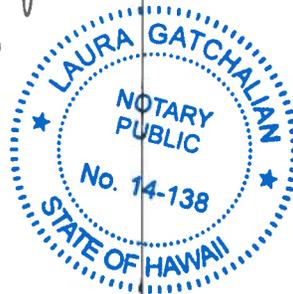
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031-11-17

**CITY AND COUNTY OF HONOLULU
ETHICS COMMISSION
LOBBYIST ANNUAL REPORT FORM**

HONOLULU
ETHICS COMMISSION
RECEIVED

Name <u>LA CITICA</u> <u>MAE PATRICIA</u> <u>R.</u>	
(Print)	Last First
Business Address <u>850 RICHARDS ST. SUITE 201, HONOLULU, HI 96813</u>	
(Street, City, State, Zip Code)	
Phone <u>591-6508</u>	
Email Address: <u>trish@hiphi.org</u>	
State name and address of organization you lobbied for. <u>Hawaii Public Health Institute</u> <u>same above</u>	
State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities. <u>\$56.71 = time/salary for lobbying (preparing / submitting testimony)</u>	
State total amount expended for lobbying by lobbyist. <u>none</u>	
List results of the legislation you sought to influence. <u>successfully stopped legislation that would make the implementation of bike paths more difficult.</u>	
Other information.	
I hereby certify that the foregoing statements are true and correct.  _____ (Signature)	Subscribed and sworn to before me This <u>10th</u> day of <u>JANUARY</u> , 20 <u>17</u> . By  _____ Notary or any official authorized to administer oaths My commission expires: <u>MAY 4, 2018</u>

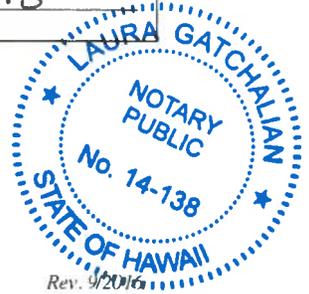


Document Date: 1/10/17 # Pages: 1
 Notary Name: Laura Gatchalian First Circuit
 Doc. Description: city and county of Honolulu Ethics Comm.
Laura Gatchalian 1/10/2017
Notary Signature Date

DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

(See back of this form for information.)

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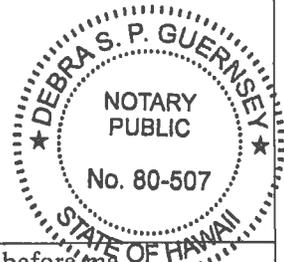


031-25-17

CITY AND COUNTY OF HONOLULU
ETHICS COMMISSION
LOBBYIST ANNUAL REPORT FORM

HONOLULU
ETHICS COMMISSION
RECEIVED

Name <u>Larson</u> <u>Betty Lou</u> <u>'17 MAY 31 P12:10</u>	
(Print) Last	First Middle
Business Address <u>1822 Keeaumoku St. Honolulu, HI 96822</u> Phone <u>373-0356</u>	
(Street, City, State, Zip Code)	
State name and address of organization you lobbied for. Catholic Charities Hawaii 1822 Keeaumoku St., Honolulu, HI 96822	
State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities. \$48	
State total amount expended for lobbying by lobbyist. 0	
List results of the legislation you sought to influence. Passed -ADU waiver of fees	
Other information.	
I hereby certify that the foregoing statements are true and correct.	Subscribed and sworn to before me, This <u>17th</u> day of <u>May</u> , 2017. By <u>Debra S.P. Guernsey</u> Notary or any official authorized to administer oaths
<u>Betty Lou Larson</u> (Signature)	My commission expires: <u>3/6/2018</u> First Circuit, State of Hawaii; One (1) page



DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

(See back of this form for information.)
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05 6-1-17

**CITY AND COUNTY OF HONOLULU
ETHICS COMMISSION
LOBBYIST ANNUAL REPORT FORM**

HONOLULU
ETHICS COMMISSION
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Name lee Peter H.M.
(Print) Last First Middle
Business Address 650 Iwilei Road, Suite 285, Hon. HI 96817 Phone (808) 845-3238 x2
(Street, City, State, Zip Code)

17 JAN 10 P 3:18

Email Address: p.lee@hawaii.leeet.org

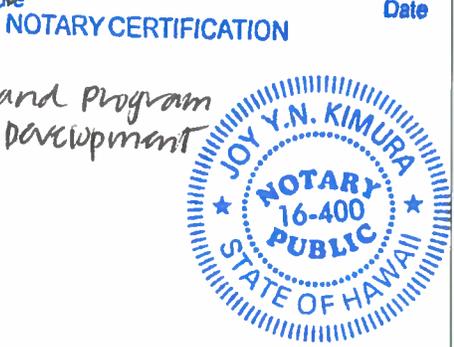
State name and address of organization you lobbied for.
Hawaii Laborers - Employers Cooperation and Education Trust (LEEET)
650 Iwilei Road, Suite 285, Honolulu, HI 96817

State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities.
0

State total amount expended for lobbying by lobbyist.
\$ 1000.00

Doc. Date: 1/19/17 # Pages: 1
Notary Name: Joy Y.N. Kimura 1st Circuit
Doc. Description: City + County of Honolulu
Ethics Commission Lobbyist Annual Report Form
Joy Y.N. Kimura 1/19/17
Notary Signature Date

List results of the legislation you sought to influence.
Bill 14 CDI Executive Operating Budget
Bill 15 CDI Executive Capital Budget and Program
2016/SDD-19(CY) Application for a Planned Development



Other information.

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

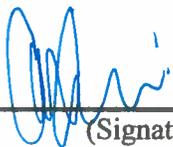
[Signature]
(Signature)

Subscribed and sworn to before me
This 9th day of January, 2017.
By Joy Y.N. Kimura Joy Y.N. Kimura
Notary or any official authorized to administer oaths
My commission expires: 11/20/2020

DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

(See back of this form for information.)
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CITY AND COUNTY OF HONOLULU
 HONOLULU ETHICS COMMISSION
 ETHICS COMMISSION RECEIVED LOBBYIST ANNUAL REPORT FORM

Name <u>17 MAR 28 11:21</u> <u>CARMILLE LOUISE</u> <u>A.</u>			
(Print)	Last	First	Middle
Business Address <u>307A KAMANI ST., HONOLULU HI 96813</u>		Phone <u>808/275-6275</u>	
(Street, City, State, Zip Code)			
Email Address: <u>carmille.lim@gmail.com / hawaii@commoncause.org</u>			
State name and address of organization you lobbied for. <u>COMMON CAUSE HAWAII</u> <u>307A KAMANI ST.</u> <u>HONOLULU, HI 96813</u>			
State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities. <u>\$500.00</u>			
State total amount expended for lobbying by lobbyist. <u>\$316.09</u>			
List results of the legislation you sought to influence. <u>CHARTER PROPOSALS AND TESTIMONY RELATED TO VOTING/ELECTIONS, GOVT ETHICS & ACCOUNTABILITY, GOVT. TRANSPARENCY.</u>			
Other information. <u>LOBBYIST TERMINATION AS OF AUGUST 2016.</u> <u>PLEASE CONTACT CURRENT LOBBYIST/EXECUTIVE CORIE MINIDA AT 808/275-6275.</u>			
I hereby certify that the foregoing statements are true and correct.		Subscribed and sworn to before me	
 (Signature)		This <u>20th</u> day of <u>March</u> , 20 <u>17</u> .	
		By <u>Kathleen Sipple</u> Notary or any official authorized to administer oaths	
		My commission expires: <u>May 11, 2018</u>	

DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

(See back of this form for information.)

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KATHLEEN SIPPLE
 Notary Public, State of Michigan
 County of Washtenaw
 My Commission Expires May 11, 2018
 Acting in the County of Washtenaw
 Rev. 9/2016

3.28.17

Jan 9 11:41 AM '17
Laurie
Krissy

CITY AND COUNTY OF HONOLULU
ETHICS COMMISSION
LOBBYIST ANNUAL REPORT FORM
HONOLULU ETHICS COMMISSION RECEIVED

Name Lincoln Faye
(Print) Last First
17 JAN 2017 12:41
Business Address 206 NORTH 2100 West, Salt Lake City, Utah 84116 Phone (801) 325-0153
(Street, City, State, Zip Code)
Email Address: faye.lincoln@Avalonhealthcare.com

State name and address of organization you lobbied for.
Avalon Health Care - NO LOBBYING.

State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities.
N/A - 0

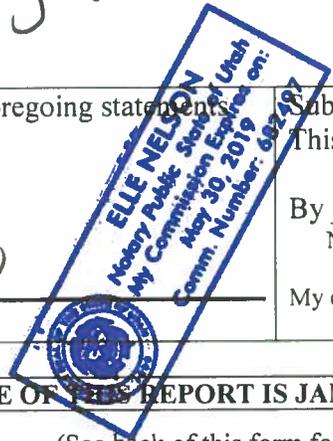
State total amount expended for lobbying by lobbyist.
- 0 -

List results of the legislation you sought to influence.
- N/A - NONE

Other information.
no lobbying activities occurred this year.

I hereby certify that the foregoing statements are true and correct.
Subscribed and sworn to before me
This 29th day of December, 2016.
By Elle Nelson
Notary or any official authorized to administer oaths
My commission expires: May 30, 2019

Faye Lincoln
(Signature)



DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

(See back of this form for information.)

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01/04/17

**CITY AND COUNTY OF HONOLULU
ETHICS COMMISSION
LOBBYIST ANNUAL REPORT FORM**

Name	<u>Lum</u>	<u>Lori</u>	<u>C.</u>
	<small>(Print) Last</small>	<small>First</small>	<small>Middle</small>
Business Address	<u>999 Bishop St., #1250; Honolulu, HI</u>		Phone <u>544-8300</u>
	<small>(Street, City, State, Zip Code)</small>		96813
Email Address:	<u>llum@wik.com</u>		
State name and address of organization you lobbied for.			
<p align="center">American Promotional Events N.W., Inc. 2120 Milwaukee Way Tacoma, WA 98421</p>			
State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities.			
\$0			
State total amount expended for lobbying by lobbyist.			
\$0			
List results of the legislation you sought to influence.			
N/A			
Other information.	<p align="center">None.</p>		
	<p align="center"> <small>Doc Date</small> <u>11/6/17</u> <small># Pages</small> <u>1</u> <small>Charlene M. Moriwaki</small> <small>First Circuit</small> <small>Doc Description</small> <u>C&C of Honolulu Ethics Comm. Lobbyist Annual Report Form</u> <small>Notary Signature</small> <u>[Signature]</u> <small>Date</small> <u>11/6/17</u> NOTARY CERTIFICATION </p>		
<p>I hereby certify that the foregoing statements are true and correct.</p> <p align="center"><u>[Signature]</u> (Signature)</p>	<p>Subscribed and sworn to before me This <u>6th</u> day of <u>January</u>, 20<u>17</u>.</p> <p>By <u>[Signature]</u> Notary or any official authorized to administer oaths</p> <p>My commission expires: <u>6/30/20</u></p>		

HONOLULU ETHICS COMMISSION RECEIVED
 17 JAN -9 AM 1:29

DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

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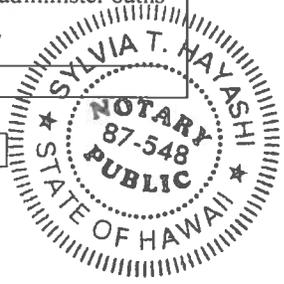
**CITY AND COUNTY OF HONOLULU
ETHICS COMMISSION
LOBBYIST ANNUAL REPORT FORM**

Name	LUNING	DEBRA	M.A.
	<small>(Print) Last</small>	<small>First</small>	<small>Middle</small>
Business Address	733 BISHOP STREET, SUITE 1400 HONOLULU, HI 96813		Phone (808) 599-8370
	<small>(Street, City, State, Zip Code)</small>		
Email Address:	DebbieL@GentryHawaii.com		
State name and address of organization you lobbied for.			
GENTRY HOMES, LTD. 733 BISHOP STREET, SUITE 1400 HONOLULU, HI 96813			
State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities.			
\$0			
State total amount expended for lobbying by lobbyist.			
\$0			
List results of the legislation you sought to influence.			
N/A			
Other information.			
I hereby certify that the foregoing statements are true and correct. <div style="text-align: center;">  _____ (Signature) </div>		Subscribed and sworn to before me This <u>5</u> day of <u>January</u> , 2017. By <u>Sylvia T. Hayashi</u> <small>Notary or any official authorized to administer oaths</small> SYLVIA T. HAYASHI My commission expires: <u>10-26-19</u>	

HONOLULU
 ETHICS COMMISSION
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 17 JAN -9 AM 1:40

DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

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01-11-17

**CITY AND COUNTY OF HONOLULU
ETHICS COMMISSION
LOBBYIST ANNUAL REPORT FORM**

Name LUNING DEBRA M.A.
 (Print) Last First Middle
 Business Address 733 BISHOP STREET, SUITE 1400 Phone (808) 599-8370
HONOLULU, HI 96813
 (Street, City, State, Zip Code)

Email Address: DebbieL@GentryHawaii.com

State name and address of organization you lobbied for.

**GENTRY INVESTMENT PROPERTIES
733 BISHOP STREET, SUITE 1400
HONOLULU, HI 96813**

State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities.

\$0

State total amount expended for lobbying by lobbyist.

\$0

List results of the legislation you sought to influence.

N/A

Other information.

HONOLULU
ETHICS COMMISSION
RECEIVED
17 JAN -9 AM 1:40

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

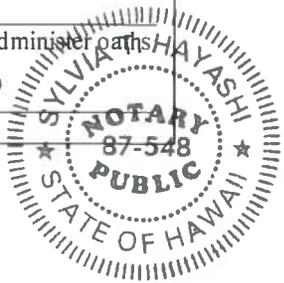


(Signature)

Subscribed and sworn to before me
 This 6 day of January, 2017.

By 
 Notary of any official authorized to administer oaths
SILVIA T. HAYASHI

My commission expires: 10.26.19



DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

(See back of this form for information.)

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01.11.17

CITY AND COUNTY OF HONOLULU
ETHICS COMMISSION
LOBBYIST ANNUAL REPORT FORM

HONOLULU
ETHICS COMMISSION
RECEIVED

Name Lyons Timothy L.
(Print) Last First Middle

*16 NOV 30 P2:06

Business Address 1188 Bishop St., Ste. 1003*Honolulu, HI 96813 Phone (808) 537-4308
(Street, City, State, Zip Code)

Email Address: timllyons@cs.com

State name and address of organization you lobbied for.

Anheuser Busch Companies, LLC
1201 K. Street, Ste. 730
Sacramento, CA 95817

State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities.

\$2000.00

State total amount expended for lobbying by lobbyist.

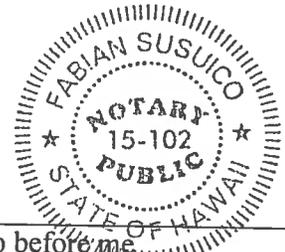
-0-

List results of the legislation you sought to influence.

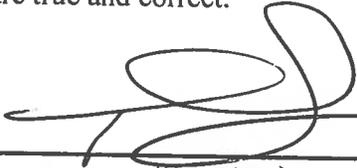
Liquor legislation.

Other information.

None



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


(Signature)

Subscribed and sworn to before me
This 23rd day of November, 2016.

By Fabian Susuico
Notary or any official authorized to administer oaths

My commission expires: 03/15/2019

DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

(See back of this form for information.)

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Rev. 9/2016

"NOTARY CERTIFICATE ON NEXT PAGE"

By 11/30/2016

State of Hawaii

City & County of Honolulu

) SS:
)

On this 23rd day of November, in the year of 2016, before me, Fabian Susuico, personally appeared _____

Timothy L. Lyons (day) (month) (year)
(insert name(s) and title(s) of person(s) whose signature(s) is/are being notarized)

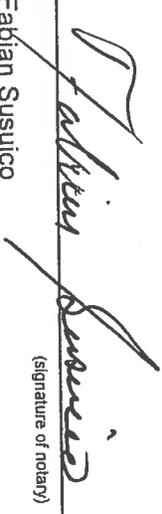
personally known to me (or provided to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to this

3 page, Lobbyist Annual Report Form (inc. notary acknowledgment)
(# of pages) (document description)

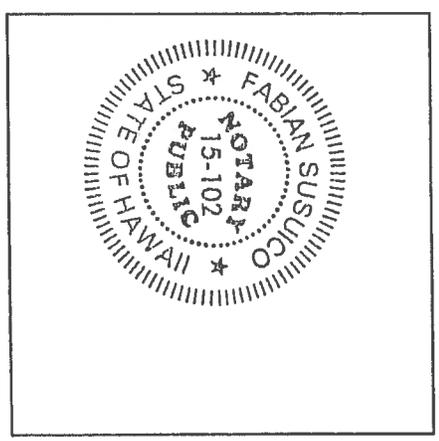
dated 11/23/2016 and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies),
(date of document)

and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.


(signature of notary)

Fabian Susuico
Notary Public, State of Hawaii
My commission Expires: March 15, 2019
Judicial Circuit: First Circuit Hawaii



[This area is for Official Notarial Seal]

**CITY AND COUNTY OF HONOLULU
ETHICS COMMISSION
LOBBYIST ANNUAL REPORT FORM**

Name	<u>Lum</u>	<u>Lori Ann</u>	<u>C.</u>										
	<small>(Print) Last</small>	<small>First</small>	<small>Middle</small>										
Business Address	<u>999 Bishop St., #1250; Honolulu, HI</u>		Phone <u>544-8300</u>										
	<small>(Street, City, State, Zip Code)</small>		<u>96813</u>										
Email Address:	<u>llum@wik.com</u>												
State name and address of organization you lobbied for.													
<p align="center">Douglas Emmett Management LLC 808 Wilshire Blvd., Suite 200 Santa Monica, CA 90401-1889</p>													
State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities.													
\$8,407.50													
State total amount expended for lobbying by lobbyist.													
\$0													
List results of the legislation you sought to influence.													
Bills 11 and 25 were deferred in the Committee on Zoning & Planning.													
Other information.	<table border="0" style="width:100%;"> <tr> <td>Doc Date <u>1/6/17</u></td> <td># Pages <u>1</u></td> </tr> <tr> <td>Charlene M. Moriwaki</td> <td>First Circuit</td> </tr> <tr> <td colspan="2">Doc Description <u>C+C of Honolulu Ethics Comm. Lobbyist Annual Report Form</u></td> </tr> <tr> <td><u>Charlene M. Moriwaki</u></td> <td>Date <u>1/6/17</u></td> </tr> <tr> <td>Notary Signature</td> <td>Date</td> </tr> </table>			Doc Date <u>1/6/17</u>	# Pages <u>1</u>	Charlene M. Moriwaki	First Circuit	Doc Description <u>C+C of Honolulu Ethics Comm. Lobbyist Annual Report Form</u>		<u>Charlene M. Moriwaki</u>	Date <u>1/6/17</u>	Notary Signature	Date
Doc Date <u>1/6/17</u>	# Pages <u>1</u>												
Charlene M. Moriwaki	First Circuit												
Doc Description <u>C+C of Honolulu Ethics Comm. Lobbyist Annual Report Form</u>													
<u>Charlene M. Moriwaki</u>	Date <u>1/6/17</u>												
Notary Signature	Date												
None.	NOTARY CERTIFICATION												
I hereby certify that the foregoing statements are true and correct.	Subscribed and sworn to before me												
	This <u>6th</u> day of <u>January</u> , 20 <u>17</u> .												
	By <u>Charlene M. Moriwaki</u>												
	Notary or any official authorized to administer oaths												
<u>Lori Ann C Lum</u> (Signature)	My commission expires: <u>6/1/20</u>												

HONOLULU
ETHICS COMMISSION
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17 JAN -9 AM 1:29

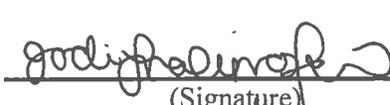
l.s.
l.s.

DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

(See back of this form for information.)

PLEASE RETAIN A COPY FOR YOUR RECORDS

CITY AND COUNTY OF HONOLULU
ETHICS COMMISSION
LOBBYIST ANNUAL REPORT FORM

Name <u>MALINOSKI</u> <u>JODI</u>		
(Print)	Last	First Middle
Business Address <u>PO BOX 2577 HONOLULU, HI 96803</u>		Phone <u>808-538-6616</u>
(Street, City, State, Zip Code)		
Email Address: <u>JODI.MALINOSKI@SIERRACLUB.ORG</u>		
State name and address of organization you lobbied for. <u>Sierra Club of Hawai'i</u>		
State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities. <u>\$ 250</u>		
State total amount expended for lobbying by lobbyist. <u>\$ 0</u>		
List results of the legislation you sought to influence. <u>- General introduction to Sierra Club of Hawai'i priority issues & concerns.</u>		
Other information.		
I hereby certify that the foregoing statements are true and correct.	Subscribed and sworn to before me This _____ day of _____, 20____.	HONOLULU ETHICS COMMISSION RECEIVED 17 JAN -9 AM 1:45
 (Signature)	By _____ Notary or any official authorized to administer oaths	
	My commission expires: _____	

DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

(See back of this form for information.)

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Jodi Malinoski

HAWAII ALL-PURPOSE ACKNOWLEDGMENT H.R.S 502-41

State of Hawaii

County of CITY & HONOLULU

1ST Judicial Circuit

SS. }

Document Description: CITY & COUNTY OF HONOLULU

ETHICS COMMISSION LOBBYIST
ARRIVAL REPORT FORM
Document Date: JAN 06 2017 No. Pages: 1

On this 6TH day of JAN, 20 17

before me personally appeared

(1) SODI MARINAKI

Name of Signer

(2)

[Signature]

Name of Signer

and

to me personally known, who, being by me duly sworn or affirmed, did say that such person(s) executed the foregoing instrument as the free act and deed of such person(s), and if applicable in the capacity shown, having been duly authorized to execute such instrument in such capacity.

JAN 06 2017

Notary's Signature

[Signature]

KELLY M. GATIOAN

Date

Notary Public, First Judicial Circuit

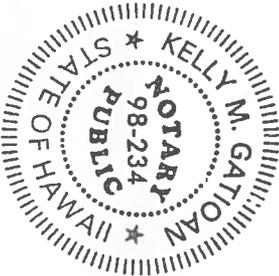
State of Hawaii

My commission expires:

May 06, 2018

My commission expires: May 06, 2018

Place Notary Seal or Stamp Above



Doc. Date: 1-6-17 # Pages: 1
 Notary Name: _____ Circuit _____
 Doc. Description: Lobbyist
Annual Report Form
 Notary Signature: [Signature] Date: 1-6-17

CITY AND COUNTY OF HONOLULU
 ETHICS COMMISSION
 LOBBYIST ANNUAL REPORT FORM
 HONOLULU ETHICS COMMISSION RECEIVED

Name Marrone Gladys G.
 (Print) Last First 17 JAN -9 AM 11:46

Business Address P.O. Box 970967 Phone 808.629.7509
 (Street, City, State, Zip Code)

Email Address: ggm@biahawaii.org

State name and address of organization you lobbied for.
BIA-Hawaii
P.O. Box 970967
Waipahu, HI 96797

State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities.
\$971.00

State total amount expended for lobbying by lobbyist.
\$05

List results of the legislation you sought to influence.
Accessory Dwelling Units - passed

Other information.

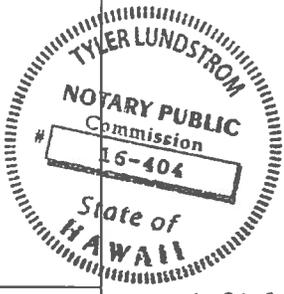
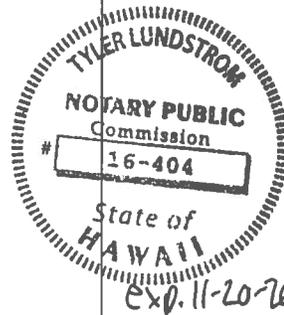
I hereby certify that the foregoing statements are true and correct.

Subscribed and sworn to before me
 This 6th day of JANUARY, 2017.

By [Signature]
 Notary or any official authorized to administer oaths

My commission expires: 11-20-20

(Signature)



DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

(See back of this form for information.)
 PLEASE RETAIN A COPY FOR YOUR RECORDS

**CITY AND COUNTY OF HONOLULU
ETHICS COMMISSION
LOBBYIST ANNUAL REPORT FORM**

Name	<u>Maruyama</u>	<u>Lisa</u>	<u>T.</u>
	<small>(Print) Last</small>	<small>First</small>	<small>Middle</small>
Business Address	<u>1020 S. Beretania St., 2nd Floor, Honolulu HI 96814</u>		Phone <u>808-529-0454</u>
	<small>(Street, City, State, Zip Code)</small>		
Email Address:	<u>lmaruyama@hano-hawaii.org</u>		
State name and address of organization you lobbied for.			
<u>Hawai'i Alliance of Nonprofit Organizations</u>			
<u>1020 S. Beretania St., 2nd Floor</u>			
<u>Honolulu, HI 96814</u>			
State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities.			
	<u>\$474 (compensation)</u>		
State total amount expended for lobbying by lobbyist.			
	<u>\$13 (parking/mileage)</u>		
List results of the legislation you sought to influence.			
	<u>Charter Amendment #13 regarding Grants in Aid - passed</u>		
Other information.			

Document Date: UNDATED AT SIGNING **# Pages:** 1

Notary Name: LAURA F. WOODS **First Circuit**

Doc. Description: City & County of Honolulu

Ethics Commission - Lobbyist Annual Report Form

Notary Signature: [Signature] **Date:** JAN 10 2017

HONOLULU ETHICS COMMISSION RECEIVED

17 JAN 10 P 1:45

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

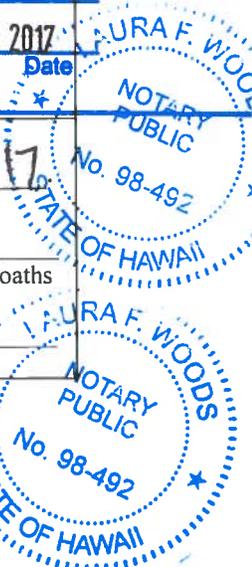
[Signature]

(Signature)

Subscribed and sworn to before me This 10th day of January, 2017

By [Signature] **LAURA F. WOODS**
Notary or any official authorized to administer oaths

My commission expires: 9/24/2018



DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

(See back of this form for information.)

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**CITY AND COUNTY OF HONOLULU
ETHICS COMMISSION
LOBBYIST ANNUAL REPORT FORM**

Name <u>Masatsugu</u> <u>Jeffrey</u> <u>S</u>		
(Print)	Last	First Middle
Business Address <u>P.O. Box 22534 Honolulu HI 96823</u> Phone <u>554 3406</u>		
(Street, City, State, Zip Code)		
State name and address of organization you lobbied for. <u>Hawaii Tapers Market Recovery Fund</u>		
State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities. <u>\$5,000</u>		
State total amount expended for lobbying by lobbyist. <u>\$15</u>		
List results of the legislation you sought to influence. <u>Bills 62 + 63 (2016) - passed</u> <u>Resolutions 16-155 + 16-172 - passed</u>		
Other information.		
I hereby certify that the foregoing statements are true and correct.		Subscribed and sworn to before me This <u>10</u> day of <u>January</u> , 20 <u>17</u> .
 _____ (Signature)		By <u>Rosemarie Kida</u> Notary or any official authorized to administer oaths
		My commission expires: <u>9-5-2019</u>

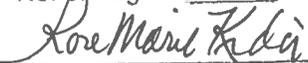
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ETHICS COMMISSION
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JAN 10 P2:14

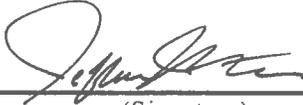
DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

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NOTARY PUBLIC CERTIFICATION
 Rosemarie Kida First Judicial Circuit
 Doc. Description: Lobbyist Annual Report Form
 No. of Pages: 1 Date of Doc. 1-10-17

 Notary Signature Date
 031.13.17

**CITY AND COUNTY OF HONOLULU
ETHICS COMMISSION
LOBBYIST ANNUAL REPORT FORM**

Name <u>Masatsugu</u> <u>Jeffrey</u> <u>S</u>		
(Print) Last	First	Middle
Business Address <u>P.O. Box 22534 Honolulu HI 96823</u> Phone <u>5543406</u>		
<small>(Street, City, State, Zip Code)</small>		
State name and address of organization you lobbied for. <u>Hawaii Glaziers Architectural Metal Glassworkers Local Union 1889 AFL-CIO Stabilization Fund</u>		
State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities. <u>\$5,000</u>		
State total amount expended for lobbying by lobbyist. <u>\$15</u>		
List results of the legislation you sought to influence. <u>Bills 62 + 63 (2016) - passed.</u> <u>Resolutions 16-155 and 16-172 (2016) - passed</u>		
Other information.		
I hereby certify that the foregoing statements are true and correct.		Subscribed and sworn to before me This <u>10</u> day of <u>January</u> , 20 <u>17</u> .
 _____ (Signature)		By <u>Rosemarie Kida</u> Notary or any official authorized to administer oaths
		My commission expires <u>9-5-2019</u>

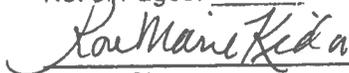
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DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

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NOTARY PUBLIC CERTIFICATION
 Rosemarie Kida First Judicial Circuit
 Doc Description: Lobbyist Annual Report Form

 No. of Pages: 1 Date of Doc. 1-10-17

 Notary Signature 1-10-17
 Date

**CITY AND COUNTY OF HONOLULU
ETHICS COMMISSION
LOBBYIST ANNUAL REPORT FORM**

Name <u>Alasatsuqu Jeffrey S</u>		
(Print) Last	First	Middle
Business Address <u>P.O. Box 22534 Honolulu HI</u>		Phone <u>554 3406</u>
(Street, City, State, Zip Code) <u>96823</u>		
State name and address of organization you lobbied for. <u>Painting Industry of Hawaii Labor Management Cooperation Trust Fund</u>		
State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities. <u>\$5,500.00</u>		
State total amount expended for lobbying by lobbyist. <u>\$ 15</u>		
List results of the legislation you sought to influence. <u>Bills 62 + 63 (2016) - passed.</u> <u>Resolution 16-172 - passed.</u> <u>Resolution 16-155 - passed.</u> Other information.		
I hereby certify that the foregoing statements are true and correct.  _____ (Signature)	Subscribed and sworn to before me This <u>10</u> day of <u>January</u> , 20 <u>17</u> . By <u>Rae Marie Kida</u> Notary or any official authorized to administer oaths My commission expires <u>9-5-2019</u>	

HONOLULU
 ETHICS COMMISSION
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DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

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NOTARY PUBLIC CERTIFICATION
 Notary: Rae Marie Kida First Judicial Circuit
 Doc. Description: Lobbyist Annual Report Form
 No. of Pages: 1 Date of Doc. 1-10-17

 Notary Signature _____ Date 1-10-17

**CITY AND COUNTY OF HONOLULU
ETHICS COMMISSION
LOBBYIST ANNUAL REPORT FORM**

Name <u>Masatsugu</u> <u>Jeffrey</u> <u>S</u>		
(Print)	Last	First Middle
Business Address <u>P.O. Box 22534 Honolulu HI 96823</u>		Phone <u>554 3406</u>
<small>(Street, City, State, Zip Code)</small>		
State name and address of organization you lobbied for. <u>Carpet Linoleum and Soft Tile Local Union 1926</u> <u>Market Recovery Trust Fund</u>		
State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities. <u>\$5,000.00</u>		
State total amount expended for lobbying by lobbyist. <u>\$15</u>		
List results of the legislation you sought to influence. <u>Bills 62 + 63 (2016) - PASSED.</u> <u>Resolutions 16 - 155 and 16 - 172 (2016) - PASSED</u>		
Other information.		
I hereby certify that the foregoing statements are true and correct.  _____ (Signature)		Subscribed and sworn to before me This <u>10</u> day of <u>January</u> , 20 <u>17</u> . By <u>Rose Marie Kida</u> Notary or any official authorized to administer oaths My commission expires <u>9-5-2019</u>

HONOLULU
 ETHICS COMMISSION
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DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

(See back of this form for information.)

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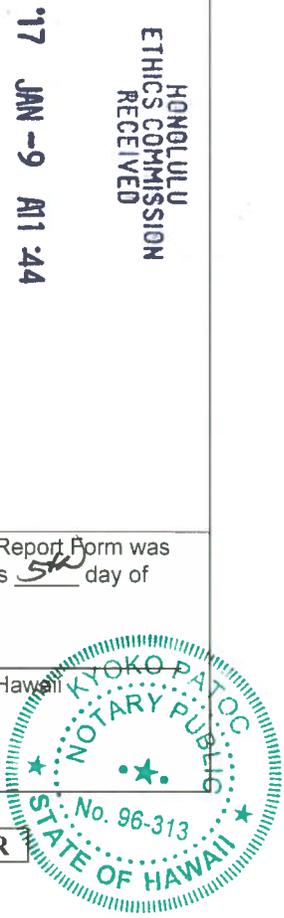
NOTARY PUBLIC CERTIFICATION
 Rosemarie Kida First Judicial Circuit
 Doc. Description: Lobbyist Annual Report Form

No. of Pages: 1 Date of Doc. 1-10-17
Rose Marie Kida 1-10-17
 Notary Signature Date

021.12.17

CITY AND COUNTY OF HONOLULU
ETHICS COMMISSION
LOBBYIST ANNUAL REPORT FORM

Name	<u>Mirikitani</u>	<u>Richard</u>	<u>K</u>
(Print)	Last	First	Middle
Business Address	<u>680 Iwilei Road, Box 510, Honolulu, HI 96817</u>		Phone <u>548-4811</u>
	(Street, City, State, Zip Code)		
Email Address:	<u>rmirikitani@castlecooke.com</u>		
State name and address of organization you lobbied for.	Castle & Cooke Homes Hawaii, Inc. 680 Iwilei Road, Box 510 Honolulu, HI 96817		
State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities.	None		
State total amount expended for lobbying by lobbyist.	None		
List results of the legislation you sought to influence.	n/a		
Other information.	n/a		
I hereby certify that the foregoing statements are true and correct.	This 1-page undated Lobbyist Annual Report Form was subscribed and sworn to before me this <u>5th</u> day of <u>January</u> , 20 <u>17</u> .		
 (Signature)	Kyoko Patoc, Notary Public, State of Hawaii First Judicial Circuit My commission expires: 6/14/2020		



DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

(See back of this form for information.)

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BT-11-17

CITY AND COUNTY OF HONOLULU
ETHICS COMMISSION
LOBBYIST ANNUAL REPORT FORM

Name Morris George "Red" A.
(Print) Last First Middle

Business Address 222 S. Vineyard St., Ste. 401, Honolulu, HI 96813 Phone (808) 531-4551
(Street, City, State, Zip Code)

Email Address: gamorrisinc@gmail.com

State name and address of organization you lobbied for.

American Chemistry Council
1121 L Street, Suite 609
Sacramento, CA 95814

State total amount received as a lobbyist representing contributions, membership fees and other receipts related to lobbying activities.

\$2,094.24

State total amount expended for lobbying by lobbyist.

\$2,094.24

List results of the legislation you sought to influence.

There was no movement on bills that would ban food vendors in Honolulu from using polystyrene foam food service containers.

Other information.

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


(Signature)

Subscribed and sworn to before me

This 9th day of Jan, 2017.

By  **Darwin S. Serrano**

Notary or any official authorized to administer oaths

My commission expires: MAY 15 2020

NOTARY CERTIFICATION ON BACK OF THIS PAGE

DUE DATE OF THIS REPORT IS JANUARY 10 OF EACH YEAR

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01/13/17

