



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/>

THIS SPACE FOR OFFICE USE ONLY

HONOLULU
 ETHICS COMMISSION
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2019 REGISTRATION

Lobbyist Registration
 (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle) Delaunay, Christopher Michael		
LOBBYIST FIRM/EMPLOYER (if applicable) Pacific Resource Partnership		TELEPHONE 808-528-5557
MAILING ADDRESS (No. and Street or P.O. Box) 1100 Alakea Street, 4th Floor		FAX 808-528-0421
		EMAIL cdelaunay@prp-hawaii.com
(City) Honolulu	(State) HI	(Zip Code) 96813

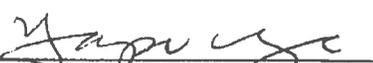
PART II.A ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) Pacific Resource Partnership		TELEPHONE 808-528-5557
MAILING ADDRESS (No. and Street or P.O. Box) 1100 Alakea Street, 4th Floor		FAX 808-528-0421
		EMAIL cdelaunay@prp-hawaii.com
(City) Honolulu	(State) HI	(Zip Code) 96813
ESTIMATED NUMBER OF MEMBERS (if lobbying on behalf of members) approximately 240 contractors & 5,000 union members		<input type="checkbox"/> Not Applicable
METHODS USED BY MEMBERS TO MAKE POLICY DECISIONS Board of Directors and Executive Director		<input 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

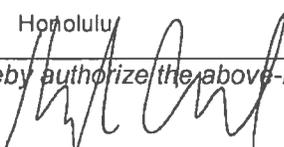
PART III DESCRIPTION OF SUBJECTS ON WHICH YOU EXPECT TO LOBBY

<input type="checkbox"/> Business & Economic Development	<input type="checkbox"/> Community Services	<input type="checkbox"/> Customer Services
<input type="checkbox"/> Culture & Arts	<input checked="" type="checkbox"/> Housing	<input checked="" type="checkbox"/> Public Works, Infrastructure & Sustainability
<input type="checkbox"/> Parks & Recreation	<input type="checkbox"/> Public Health, Safety & Welfare	<input 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

<p><i>I hereby certify that the foregoing statements are true and correct.</i></p> <p></p> <p>_____ LOBBYIST SIGNATURE</p> <p>1/4/19</p> <p>_____ DATE</p>	<p>Subscribed and sworn to before me</p> <p>This <u>4th</u> day of <u>January</u>, <u>2019</u>.</p> <p>By: </p> <p>_____ NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS</p> <p>My commission expires:</p> <p><u>JUN 11 2022</u></p>
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PART V AUTHORIZATION TO LOBBY

NAME Kyle Chock		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED Interim Executive Director	
NAME OF ORGANIZATION (if applicable) Pacific Resource Partnership		TELEPHONE 808-528-5557	
MAILING ADDRESS (No. and Street or P.O. Box) 1100 Alakea Street, 4th Floor		FAX 808-528-0421	
		EMAIL	
(City) Honolulu	(State) HI	(Zip Code) 96813	
<p><i>I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.</i></p> <p></p> <p>_____ (Signature of Authorizing Officer or Person Represented)</p> <p style="text-align: right;"><u>1/9/19</u> (Date)</p>			

HAWAII ALL-PURPOSE ACKNOWLEDGMENT
H.R.S 502-41(6)

State of Hawaii }
County of Honolulu } ss.

On this 4th day of January, 2019, in the First Circuit Court, State of Hawaii,
Day Month Year Name of Circuit

before me personally appeared Christopher Michael Delaunay (.)
Name of Signer 1

(and _____) (.) to me personally known or
Name of Signer 2 (if any)

proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to

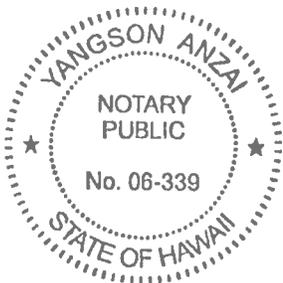
this instrument, who, being by me duly sworn or affirmed, did say that such person(s) executed the foregoing

instrument identified or described as 2019 Lobbyist Registration as the free act
Type of Document

and deed of such person(s), and if applicable, in the capacity shown having been duly authorized to execute

such instrument in such capacity. The foregoing instrument is dated January 4, 2019
Date of Document

and contained 2 pages at the time of this acknowledgment/certification.
No. of Pages



Place Notary Seal or Stamp Above

Yangson Anzai
Printed Name of Notary Public

Notary Public — STATE OF HAWAII

My commission expires: JUN 11 2022

[Signature]
Signature of Notary Public