



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
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2020 REGISTRATION

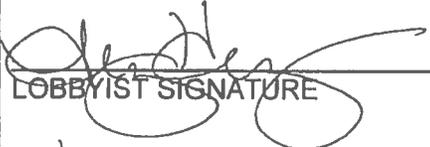
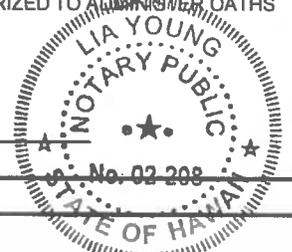
Lobbyist Registration
 (Type or Print Clearly)

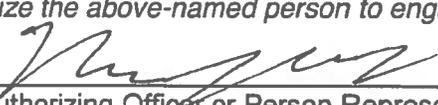
PART I LOBBYIST		
NAME (Last) (First) (Middle) Hennessey, Amy, Melinda		
LOBBYIST FIRM/EMPLOYER (if applicable) Ulupono Initiative	TELEPHONE 808-544-8973	
MAILING ADDRESS (No. and Street or P.O. Box) 999 Bishop St., Suite 1202	FAX 808-432-9695	
	EMAIL amy@ulupono.com	
(City) Honolulu	(State) HI	(Zip Code) 96813

PART II.A ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) Ulupono Initiative	TELEPHONE 808-544-8960	
MAILING ADDRESS (No. and Street or P.O. Box) 999 Bishop St., Suite 1202	FAX	
	EMAIL	
(City) Honolulu	(State) HI	(Zip Code) 96813
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		

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 checked="" 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	
<p>I hereby certify that the foregoing statements are true and correct.</p> <p> LOBBYIST SIGNATURE</p> <p><u>1/30/2020</u> DATE</p>	<p>Subscribed and sworn to before me</p> <p>This <u>30th</u> day of <u>January</u>, <u>2020</u>.</p> <p>By: <u>Lia Young</u> NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS</p> <p>My commission expires: <u>May 12, 2022</u></p> 

PART V AUTHORIZATION TO LOBBY		
NAME Murray R. Clay	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED President	
NAME OF ORGANIZATION (if applicable) Ulupono Initiative	TELEPHONE 808-544-8960	
MAILING ADDRESS (No. and Street or P.O. Box) 999 Bishop St., Suite 1202	FAX 808-432-9695	EMAIL mclay@ulupono.com
(City) Honolulu	(State) HI	(Zip Code) 96813
<p>I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.</p> <p> (Signature of Authorizing Officer or Person Represented)</p> <p>Doc. Date: <u>1/30/2020</u> (Date) # Pages: <u>2</u></p> <p>Lia Young Doc. Description: <u>2020 Registration</u></p>		