



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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02-11-19

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2019 REGISTRATION

Lobbyist Registration
 (Type or Print Clearly)

| PART I LOBBYIST | | |
|--|---------------|--|
| NAME (Last) (First) (Middle) Iosua, Michael L. | | |
| LOBBYIST FIRM/EMPLOYER (if applicable) Imanaka Asato, LLLC | | TELEPHONE 521-9500 |
| MAILING ADDRESS (No. and Street or P.O. Box) 745 Fort Street Mall, 17th Floor | | FAX 541-9050 |
| | | EMAIL miosua@imanaka-asato.com |
| (City) Honolulu | (State) HI | (Zip Code) 96813 |

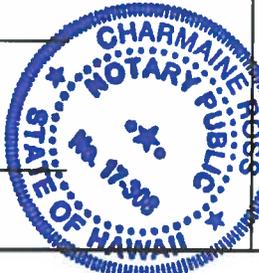
| PART II.A ORGANIZATION | | |
|--|---------------|--|
| NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) D.R. Horton-Schuler Homes, LLC, dba D.R. Horton-Schuler Division | | TELEPHONE |
| MAILING ADDRESS (No. and Street or P.O. Box) 130 Merchant Street, Suite 112 | | FAX |
| | | EMAIL |
| (City) 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 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><u>1/10/2019</u></p> <p>DATE</p> | <p>Subscribed and sworn to before me</p> <p>This <u>10th</u> day of <u>January</u>, <u>2019</u>.</p> <p>By: <u>Charmaine Ross</u> </p> <p>NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS</p> <p>My commission expires: <u>July 25, 2021</u></p> |
|  | |
| <p>NOTARY CERTIFICATION <u>1st</u> Circuit</p> <p>Date of Doc.: <u>1/10/19</u> No. of Pages <u>2</u></p> <p>Doc. Description: <u>2019 Lobbyist Registration</u></p> <p>Name: <u>Charmaine Ross</u> Date: <u>1/10/19</u></p> | |

PART V AUTHORIZATION TO LOBBY

| | | | |
|---|---------------|--|--|
| NAME Robert Bruhl | | TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED Division President | |
| NAME OF ORGANIZATION (if applicable) D.R. Horton-Schuler Homes, LLC dba D.R. Horton-Schuler Division | | TELEPHONE 521-5661 | |
| MAILING ADDRESS (No. and Street or P.O. Box) 130 Merchant Street, Suite 112 | | FAX | |
| | | EMAIL RBruhl@drhorton.com | |
| (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><u>1/10/19</u></p> <p>(Date)</p> | |



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2019 REGISTRATION

Lobbyist Registration
 (Type or Print Clearly)

| PART I LOBBYIST | | |
|--|------------|--|
| NAME (Last) (First) (Middle) Iosua, Michael L. | | |
| LOBBYIST FIRM/EMPLOYER (if applicable) Imanaka Asato, LLLC | | TELEPHONE 521-9500 |
| MAILING ADDRESS (No. and Street or P.O. Box) 745 Fort Street Mall, 17th Floor | | FAX 541-9050 |
| | | EMAIL miosua@imanaka-asato.com |
| (City) Honolulu | (State) HI | (Zip Code) 96813 |

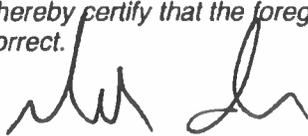
| PART II.A ORGANIZATION | | |
|---|------------|--|
| NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) Elemental Excelerator | | TELEPHONE 808-237-5050 |
| MAILING ADDRESS (No. and Street or P.O. Box) 1000 Bishop Street, #505 | | FAX |
| | | EMAIL policy@elementalexcelerator.com |
| (City) Honolulu | (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

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| <input checked="" type="checkbox"/> Business & Economic Development | <input type="checkbox"/> Community Services | <input type="checkbox"/> Customer Services |
| <input type="checkbox"/> Culture & Arts | <input 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 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): | | |

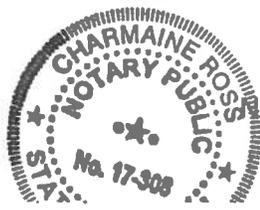
PART IV LOBBYIST CERTIFICATION

| | |
|--|--|
| <p><i>I hereby certify that the foregoing statements are true and correct.</i></p>  <p>_____ LOBBYIST SIGNATURE</p> <p>1/7/19 _____ DATE</p> | <p>Subscribed and sworn to before me</p> <p>This <u>7th</u> day of <u>January</u>, 20<u>19</u>.</p> <p>By: <u>Charmaine Ross</u>  NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS</p> <p>My commission expires: July 25, 2021</p>  |
|--|--|

PART V AUTHORIZATION TO LOBBY

| | | | |
|---|---------------|---|--|
| NAME Aki Marceau | | TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED Managing Director | |
| NAME OF ORGANIZATION (if applicable) Elemental Excelerator | | TELEPHONE | |
| MAILING ADDRESS (No. and Street or P.O Box) 10000 Bishop Street, #505 | | FAX | |
| | | EMAIL aki@elementalexcelerator.com | |
| (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>_____ (Signature of Authorizing Officer or Person Represented)</p> <p style="text-align: right;">1/7/19 _____ (Date)</p> | | | |

Rev. 11/2018



NOTE: This is a public document.

Doc Date: 1/7/19 # Pages: 2
 Name: Charmaine Ross 1st Circuit
 Doc. Description: 2019 Lobbyist Registration
Charmaine Ross 1/7/19
 Signature Date



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2019 REGISTRATION

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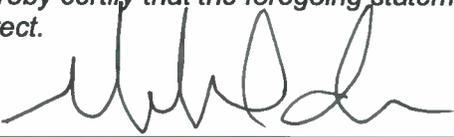
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| PART I LOBBYIST | | |
| NAME (Last) (First) (Middle) Iosua, Michael L. | | |
| LOBBYIST FIRM/EMPLOYER (if applicable) Imanaka Asato, LLLC | | TELEPHONE 521-9500 |
| MAILING ADDRESS (No. and Street or P.O. Box) 745 Fort Street Mall, 17th Floor | | FAX 541-9050 |
| | | EMAIL miosua@imanaka-asato.com |
| (City) Honolulu | (State) HI | (Zip Code) 96813 |

| | | |
|---|---------------|--|
| PART II.A ORGANIZATION | | |
| NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) Verizon Communications | | TELEPHONE 949-286-7202 |
| MAILING ADDRESS (No. and Street or P.O. Box) HQ Public Policy, Law and Security Department 15505 Sand Canyon Avenue | | FAX |
| | | EMAIL jesus.g.roman@verizon.com |
| (City) Irvine | (State) CA | (Zip Code) 92618 |
| 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 |

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| <input type="checkbox"/> Parks & Recreation | <input type="checkbox"/> Public Health, Safety & Welfare | <input type="checkbox"/> Tourism |
| <input 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): | | |

NOTARY CERTIFICATION 1st Circuit
 Date of Doc. 1/22/19 No. of Pages 2
 Doc. Description: Lobbyist Registration
 Name: Charmaine Ross Date: 1/22/19

| PART IV LOBBYIST CERTIFICATION | |
|---|---|
| <p>I hereby certify that the foregoing statements are true and correct.</p>  <p>LOBBYIST SIGNATURE</p> <p><u>1/22/2019</u></p> <p>DATE</p> | <p>Subscribed and sworn to before me</p> <p>This <u>22nd</u> day of <u>January</u>, 20<u>19</u>.</p> <p>By: <u>Charmaine Ross</u> NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS</p> <p>My commission expires: <u>July 25, 2021</u></p>  |

| PART V AUTHORIZATION TO LOBBY | | |
|---|--|--------------------------|
| NAME Jesus G. Roman | TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED Assistant General Counsel-Pacific & North Central Market | |
| NAME OF ORGANIZATION (if applicable) Verizon Communications | TELEPHONE 949-286-7202 | |
| MAILING ADDRESS (No. and Street or P.O. Box) HQ Public Policy, Law and Security Department 15505 Sand Canyon Avenue | FAX | |
| | EMAIL jesus.g.roman@verizon.com | |
| (City) Irvine | (State) CA | (Zip Code) 92618 |
| I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned. | | |
| <u>Jesus G. Roman</u> (Signature of Authorizing Officer or Person Represented) | | <u>1/10/19</u> (Date) |