



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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84-18-19

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2019 REGISTRATION

Lobbyist Registration
 (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle) Iriarte, Peter, Taisipic		
LOBBYIST FIRM/EMPLOYER (if applicable) Local #630, Operative Plasterers and Cement Masons Intl Association	TELEPHONE (808) 841-0491	
MAILING ADDRESS (No. and Street or P.O Box) 2251 N. School street	FAX	
	EMAIL masonplaster@hotmail.com	
(City) Honolulu	(State) HI	(Zip Code) 96819

PART II.A ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) Local #630, Operative Plasterers and Cement Masons Intl Association	TELEPHONE (808) 841-0491	
MAILING ADDRESS (No. and Street or P.O. Box) 2251 N. School street	FAX	
	EMAIL masonplaster@hotmail.com	
(City) Honolulu	(State) HI	(Zip Code) 96819
ESTIMATED NUMBER OF MEMBERS (if lobbying on behalf of members) 900 <input type="checkbox"/> Not Applicable		
METHODS USED BY MEMBERS TO MAKE POLICY DECISIONS <input type="checkbox"/> Not Applicable		

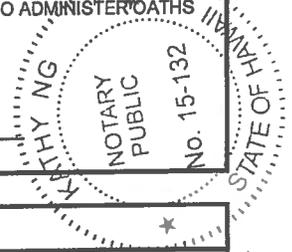
PART II.B NO LONGER LOBBYING	
<input type="checkbox"/> I am no longer authorized to lobby on behalf of the organization in Part II.A	DATE

PART III DESCRIPTION OF SUBJECTS ON WHICH YOU EXPECT TO LOBBY

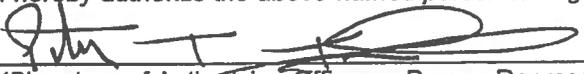
<input checked="" type="checkbox"/> Business & Economic Development	<input checked="" type="checkbox"/> Community Services	<input type="checkbox"/> Customer Services
<input type="checkbox"/> Culture & Arts	<input checked="" type="checkbox"/> Housing	<input checked="" type="checkbox"/> Public Works, Infrastructure & Sustainability
<input 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 checked="" 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>DATE _____</p>	<p>Subscribed and sworn to before me</p> <p>This <u>29</u> day of <u>March</u>, <u>2019</u>.</p> <p>By:  NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS</p> <p>My commission expires: <u>4-5-2019</u></p>
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PART V AUTHORIZATION TO LOBBY

NAME Peter T. Iriarte		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED Business Manager	
NAME OF ORGANIZATION (if applicable) Local #630, Operative Plasterers and Cement Masons Intl Association		TELEPHONE (808) 841-0491	
MAILING ADDRESS (No. and Street or P.O. Box) 2251 N. School Street		FAX	
		EMAIL masonplaster@hotmail.com	
(City) Honolulu	(State) HI	(Zip Code) 96819	
<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;"><u>2/20/19</u> (Date)</p>			

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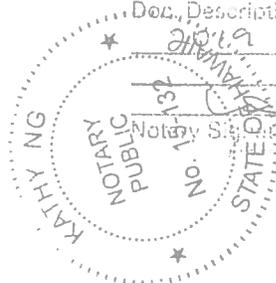
Notary Name: Kathryn Furst Circuit

Doc. Description: _____

2019 Registration

Notary Signature: [Signature]

Date: 3-29-19



MY CERTIFICATION