



HAWAII STATE ETHICS COMMISSION

1001 BISHOP STREET, HONOLULU, HAWAII 96813

or P.O. BOX 616, HONOLULU, HAWAII 96809

TEL: (808) 587-0460 FAX: (808) 587-0470

email: ethics@hawaiiethics.org

Web site: www.hawaii.gov/ethics

THIS SPACE FOR OFFICE USE ONLY

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NOTE: This is a public document.

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

STATE OF HAWAII
STATE ETHICS COMMISSION

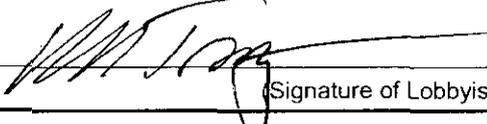
PART I LOBBYIST			
NAME (Last) Tsuji-mura	(First) Rick	(Middle) 	TELEPHONE 808-539-0400
MAILING ADDRESS (Street) Ali'i Place, Suite 1400, 1099 Alakea Street			FAX 808-533-4945
(City) Honolulu			(State) Hawaii
(Zip Code) 96813			EMAIL rtsujimura@awlaw.com
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
MAILING ADDRESS (Street)			FAX
(City)			EMAIL
(State)			(Zip Code)

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) AES Hawaii, Inc.		TELEPHONE 808-682-5330
MAILING ADDRESS (Street) 91-086 Kaomi Loop		FAX 808-682-4915
(City) Kapolei		(State) Hawaii
(Zip Code) 96707		EMAIL
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT Pat Murphy		TELEPHONE 808-682-3434
MAILING ADDRESS (Street) 91-086 Kaomi Loop		FAX 808-682-4915
(City) Kapolei		(State) Hawaii
(Zip Code) 96707		EMAIL pat.murphy@aes.com

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY			
<input type="checkbox"/> Agriculture	<input type="checkbox"/> Education	<input type="checkbox"/> Human Services	<input checked="" type="checkbox"/> Science, Technology & Economic Development
<input checked="" type="checkbox"/> Communications & Public Utilities	<input type="checkbox"/> Government Operation & Finance	<input type="checkbox"/> Intergovernmental Relations, International Affairs	<input type="checkbox"/> Tourism & Recreation
<input type="checkbox"/> Consumer Protection & Commerce	<input type="checkbox"/> Hawaiian Affairs	<input checked="" type="checkbox"/> Labor & Employment	<input checked="" type="checkbox"/> Transportation
<input type="checkbox"/> Culture, Arts, Historic Preservation	<input type="checkbox"/> Health	<input type="checkbox"/> Planning, Land & Water Use Management	<input checked="" type="checkbox"/> Other: (indicate below)
<input checked="" type="checkbox"/> Ecology, Energy Environmental Protection	<input type="checkbox"/> Housing	<input type="checkbox"/> Public Safety & Corrections	<u>Renewable energy</u>

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

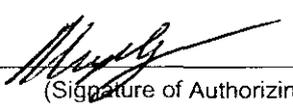
 _____ (Signature of Lobbyist)

_____ 1/16/13 _____ (Date)

PART V AUTHORIZATION TO LOBBY

NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
Pat Murphy		Vice-President	
NAME OF ORGANIZATION (if applicable)		TELEPHONE	
AES Hawaii, Inc.		808-682-3434	
MAILING ADDRESS (Street)		FAX 808-682-4915	
91-086 Kaomi Loop		EMAIL pat.murphy@aes.com	
(City)	(State)	(Zip Code)	
Kapolei	Hawaii	96707	

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.

 _____ (Signature of Authorizing Officer or Person Represented)

_____ 1/7/13 _____ (Date)