



HAWAII STATE ETHICS COMMISSION
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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)	(First)	(Middle)	TELEPHONE
Nip	Celeste	Y.K.	808-282-1415
MAILING ADDRESS (Street)			FAX
94-108 Anania Drive, #239			EMAIL
			nipfire@hawaii.rr.com
(City)	(State)	(Zip Code)	
Mililani	Hawaii	96789	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
MAILING ADDRESS (Street)			FAX
			EMAIL
(City)	(State)	(Zip Code)	

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
MultiState Associates Inc. on behalf of Verizon Wireless			703-654-1110
MAILING ADDRESS (Street)			FAX 703-684-0717
515 King Street, Suite 300			EMAIL
(City)	(State)	(Zip Code)	
Alexandria	Virginia	22314	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Carrie E. Castro			703-654-1110
MAILING ADDRESS (Street)			FAX 703-684-0717
515 King Street, Suite 300			EMAIL
			ccastro@multistate.com
(City)	(State)	(Zip Code)	
Alexandria	Virginia	22314	

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 checked="" type="checkbox"/> Government Operation & Finance	<input checked="" type="checkbox"/> Intergovernmental Relations, International Affairs	<input type="checkbox"/> Tourism & Recreation
<input checked="" type="checkbox"/> Consumer Protection & Commerce	<input type="checkbox"/> Hawaiian Affairs	<input type="checkbox"/> Labor & Employment	<input type="checkbox"/> Transportation
<input type="checkbox"/> Culture, Arts, Historic Preservation	<input type="checkbox"/> Health	<input type="checkbox"/> Planning, Land & Water Use Management	<input type="checkbox"/> Other: (indicate below)
<input checked="" type="checkbox"/> Ecology, Energy Environmental Protection	<input type="checkbox"/> Housing	<input type="checkbox"/> Public Safety & Corrections	_____

PART IV CERTIFICATION OF LOBBYIST

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

Alena YK M

1/11/2013

(Signature of Lobbyist)

(Date)

PART V AUTHORIZATION TO LOBBY

NAME <i>Paul W. Hallman</i>		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED <i>President, MultiState Associates Inc.</i>	
NAME OF ORGANIZATION (if applicable) MultiState Associates Inc. on behalf of Verizon Wireless		TELEPHONE 703-654-1110	
MAILING ADDRESS (Street) 515 King Street, Suite 300		FAX 703-684-0717	
		EMAIL	
(City) Alexandria	(State) Virginia	(Zip Code) 22314	

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

Paul W. Hallman

1/18/13

(Signature of Authorizing Officer or Person Represented)

(Date)