

**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](mailto:ethics@hawaiiethics.org)  
 Web site: [www.hawaii.gov/ethics](http://www.hawaii.gov/ethics)

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NOTE: This is a public document.

## LOBBYIST REGISTRATION FORM

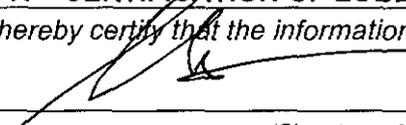
(Type or Print Clearly)

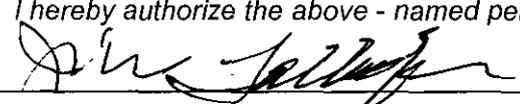
STATE OF HAWAII  
STATE ETHICS COMMISSION

<b>PART I LOBBYIST</b>			
NAME (Last) <b>Menor-McNamara</b>	(First) <b>Sherry</b>	(Middle)	TELEPHONE <b>(808)545-4300</b>
MAILING ADDRESS (Street) <b>1132 Bishop Street, Ste. 402</b>			FAX <b>(808)545-4369</b>
(City) <b>Honolulu</b>			EMAIL <a href="mailto:smenor-mcnamara@cochawaii.org">smenor-mcnamara@cochawaii.org</a>
(State) <b>HI</b>		(Zip Code) <b>96813</b>	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby) <b>The Chamber of Commerce of Hawaii</b>			TELEPHONE <b>(808)545-4300</b>
MAILING ADDRESS (Street) <b>1132 Bishop Street, Ste. 402</b>			FAX <b>(808)545-4369</b>
(City) <b>Honolulu</b>			EMAIL <a href="mailto:smenor-mcnamara@cochawaii.org">smenor-mcnamara@cochawaii.org</a>
(State) <b>HI</b>		(Zip Code) <b>96813</b>	

<b>PART II ORGANIZATION</b>			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) <b>The Chamber of Commerce of Hawaii</b>			TELEPHONE <b>(808)545-4300</b>
MAILING ADDRESS (Street) <b>1132 Bishop Street, Ste. 402</b>			FAX <b>(808)545-4369</b>
(City) <b>Honolulu</b>			EMAIL <a href="mailto:smenor-mcnamara@cochawaii.org">smenor-mcnamara@cochawaii.org</a>
(State) <b>HI</b>		(Zip Code) <b>96813</b>	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT <b>Sherry Menor-McNamara</b>			TELEPHONE <b>(808)545-4300</b>
MAILING ADDRESS (Street) <b>1132 Bishop Street, Ste. 402</b>			FAX <b>(808)545-4369</b>
(City) <b>Honolulu</b>			EMAIL <a href="mailto:smenor-mcnamara@cochawaii.org">smenor-mcnamara@cochawaii.org</a>
(State) <b>HI</b>		(Zip Code) <b>96813</b>	

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY			
<input checked="" type="checkbox"/> Agriculture	<input checked="" type="checkbox"/> Education	<input checked="" 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 checked="" type="checkbox"/> Tourism & Recreation
<input checked="" type="checkbox"/> Consumer Protection & Commerce	<input checked="" type="checkbox"/> Hawaiian Affairs	<input checked="" type="checkbox"/> Labor & Employment	<input checked="" type="checkbox"/> Transportation
<input checked="" type="checkbox"/> Culture, Arts, Historic Preservation	<input checked="" type="checkbox"/> Health	<input checked="" type="checkbox"/> Planning, Land & Water Use Management	<input checked="" type="checkbox"/> Other: (indicate below)
<input checked="" type="checkbox"/> Ecology, Energy Environmental Protection	<input checked="" type="checkbox"/> Housing	<input checked="" type="checkbox"/> Public Safety & Corrections	_____

PART IV CERTIFICATION OF LOBBYIST	
<i>I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.</i>	
	1/23/13
(Signature of Lobbyist)	(Date)

PART V AUTHORIZATION TO LOBBY		
NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
Jim Tollefson	President & CEO	
NAME OF ORGANIZATION (if applicable)	TELEPHONE	
The Chamber of Commerce of Hawaii	(808)545-4300	
MAILING ADDRESS (Street)	FAX	
1132 Bishop Street, Ste. 402	(808)545-4369	
	EMAIL	
	jtollefson@cochawaii.org	
(City)	(State)	(Zip Code)
Honolulu	HI	96813
<i>I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.</i>		
	1/23/13	
(Signature of Authorizing Officer or Person Represented)	(Date)	