

**HAWAII STATE ETHICS COMMISSION**

1001 BISHOP STREET, HONOLULU, HAWAII 96813  
 or P.O. BOX 616, HONOLULU, HAWAII 96809  
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NOTE: This is a public document.

**LOBBYIST REGISTRATION FORM** STATE OF HAWAII  
 STATE ETHICS COMMISSION  
 (Type or Print Clearly)

| <b>PART I LOBBYIST</b>  |           |            |  |
|---|-----------|------------|--|
| NAME (Last)   | (First)   | (Middle)   | TELEPHONE  |
| Karamatsu   | Christine | R.O.       | 539-0841   |
| MAILING ADDRESS (Street)  |           |            | FAX 533-4945   |
| 1099 Alakea Street, Suite 1400  |           |            | EMAIL  |
|   |           |            | <a href="mailto:ckaramatsu@awlaw.com">ckaramatsu@awlaw.com</a> |
| (City)  | (State)   | (Zip Code) |  |
| Honolulu  | HI        | 96813      |  |
| EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby) |           |            | TELEPHONE  |
| Slovin & Ito, LLP   |           |            | 539-0400   |
| MAILING ADDRESS (Street)  |           |            | FAX 533-4945   |
| 1099 Alakea Street, Suite 1400  |           |            | EMAIL  |
| (City)  | (State)   | (Zip Code) |  |
| Honolulu  | HI        | 96813      |  |

| <b>PART II ORGANIZATION</b>  |         |            |  |
|--|---------|------------|--|
| NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)                         |         |            | TELEPHONE  |
| Covanta Energy   |         |            | 862-345-5062   |
| MAILING ADDRESS (Street)   |         |            | FAX  |
| 445 South Street   |         |            | EMAIL  |
| (City)   | (State) | (Zip Code) |  |
| Morristown   | NJ      | 07960      |  |
| NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT |         |            | TELEPHONE  |
| Paula Soos   |         |            | 862-345-5062   |
| MAILING ADDRESS (Street)   |         |            | FAX  |
| 445 South Street   |         |            | EMAIL  |
|  |         |            | <a href="mailto:PSoos@CovantaEnergy.com">PSoos@CovantaEnergy.com</a> |
| (City)   | (State) | (Zip Code) |  |
| Morristown   | NJ      | 07960      |  |

**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 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 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.*

*Christi Kt*

*1/25/13*

(Signature of Lobbyist)

(Date)

**PART V AUTHORIZATION TO LOBBY**

|                                      |         |  |  |
|--------------------------------------|---------|--|--|
| NAME                                 |         | TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED |  |
| Paula Soos                           |         |  |  |
| NAME OF ORGANIZATION (if applicable) |         | TELEPHONE  |  |
| Covanta Energy                       |         | 862-345-5062                                       |  |
| MAILING ADDRESS (Street)             |         | FAX  |  |
| 445 South Street                     |         |  |  |
|                                      |         | EMAIL  |  |
|                                      |         | PSoos@CovantaEnergy.com                            |  |
| (City)                               | (State) | (Zip Code)   |  |
| Morristown                           | NJ      | 07960  |  |

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

*Paula Soos*

*1/29/13*

(Signature of Authorizing Officer or Person Represented)

(Date)