

**HAWAII STATE ETHICS COMMISSION**

1001 BISHOP STREET, HONOLULU, HAWAII 96813

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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) Arakaki	(First) Gordon	(Middle) Mamoru	TELEPHONE (808) 535-8407
MAILING ADDRESS (Street) 700 Bishop Street, Suite 2100			FAX (808) 535-8444
			EMAIL garakaki@paclawteam.com
(City) Honolulu	(State) Hawaii	(Zip Code) 96813	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby) Clay Chapman Iwamura Pulice & Nervell			TELEPHONE (808) 535-8400
MAILING ADDRESS (Street) 700 Bishop Street, Suite 2100			FAX (808) 535-8444
			EMAIL
(City) Honolulu	(State) Hawaii	(Zip Code) 96813	

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) Hawaii Employers' Mutual Insurance Company			TELEPHONE (808) 524-3642
MAILING ADDRESS (Street) 1100 Alakea Street, Suite 1400			FAX (808) 522-5510
			EMAIL
(City) Honolulu	(State) Hawaii	(Zip Code) 96813	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT Paul Naso			TELEPHONE (808) 524-3642
MAILING ADDRESS (Street) 1100 Alakea Street, Suite 1400			FAX (808) 522-5510
			EMAIL pnaso@hemic.com
(City) Honolulu	(State) Hawaii	(Zip Code) 96813	

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 type="checkbox"/> Communications & Public Utilities	<input type="checkbox"/> Government Operation & Finance	<input type="checkbox"/> Intergovernmental Relations, International Affairs	<input type="checkbox"/> Tourism & Recreation
<input checked="" 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 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.

Mordon M. Akaka
(Signature of Lobbyist)

January 24, 2013
(Date)

PART V AUTHORIZATION TO LOBBY

NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
Paul Naso		General Counsel	
NAME OF ORGANIZATION (if applicable)		TELEPHONE	
Hawaii Employers' Mutual Insurance Company		(808) 524-3642	
MAILING ADDRESS (Street)		FAX (808) 522-5510	
1100 Alakea Street, Suite 1400		EMAIL pnaso@hemic.com	
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96813	

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

[Signature]
(Signature of Authorizing Officer or Person Represented)

1.25.13
(Date)