



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

13 MAR 15 A10 :29

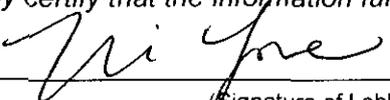
NOTE: This is a public document.

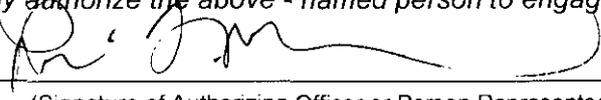
LOBBYIST REGISTRATION FORM STATE OF HAWAII
 (Type or Print Clearly) STATE ETHICS COMMISSION

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Love	Nicole (Nikki)	N.	808-529-0466
MAILING ADDRESS (Street)			FAX
1020 S. Beretania Street, 2nd Floor			EMAIL
			nlove@hano-hawaii.org
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96814	
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
Hawaii Alliance of Nonprofit Organizations (HANO)			808-529-0466
MAILING ADDRESS (Street)			FAX
1020 S. Beretania Street, 2nd Floor			EMAIL
			info@hano-hawaii.org
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96814	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Lisa Maruyama			808-529-0454
MAILING ADDRESS (Street)			FAX
same as above			EMAIL
			lmayama@hano-hawaii.org
(City)	(State)	(Zip Code)	

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 type="checkbox"/> Communications & Public Utilities	<input checked="" 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>I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.</i>	
	3/14/13
(Signature of Lobbyist)	(Date)

PART V AUTHORIZATION TO LOBBY		
NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
Lisa Maruyama	President and CEO	
NAME OF ORGANIZATION (if applicable)	TELEPHONE	
Hawaii Alliance of Nonprofit Organizations	808-529-0454	
MAILING ADDRESS (Street)	FAX	
1020 S. Beretania Street, 2nd Floor	EMAIL	
	lmaruyama@hano-hawaii.org	
(City)	(State)	(Zip Code)
Honolulu	Hawaii	96814
<i>I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.</i>		
	3/14/13	
(Signature of Authorizing Officer or Person Represented)	(Date)	