



**HAWAII STATE ETHICS COMMISSION**  
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STATE OF HAWAII  
 STATE ETHICS COMMISSION

NOTE: This is a public document.

**LOBBYIST REGISTRATION FORM**

(Type or Print Clearly)

|   |         |            |                    |
|---|---------|------------|--------------------|
| <b>PART I LOBBYIST</b>  |         |            |                    |
| NAME (Last)   | (First) | (Middle)   | TELEPHONE          |
| Saunders III  | Harry   | A.         | (808) 548-4811     |
| MAILING ADDRESS (Street)  |         |            | FAX (808) 548-2980 |
| 680 Iwilei Road Suite 510   |         |            | EMAIL              |
| (City)  | (State) | (Zip Code) |                    |
| Honolulu  | Hawai'i | 96817-5389 |                    |
| EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby) |         |            | TELEPHONE          |
| N/A   |         |            |                    |
| MAILING ADDRESS (Street)  |         |            | FAX                |
|   |         |            | EMAIL              |
| (City)  | (State) | (Zip Code) |                    |
|   |         |            |                    |

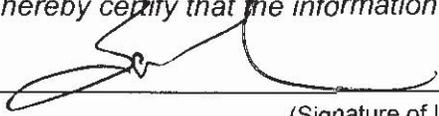
|  |         |            |                    |
|--|---------|------------|--------------------|
| <b>PART II ORGANIZATION</b>  |         |            |                    |
| NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)                         |         |            | TELEPHONE          |
| Castle & Cooke Properties, Inc.  |         |            | (808) 548-4811     |
| MAILING ADDRESS (Street)   |         |            | FAX (808) 548-2980 |
| 680 Iwilei Road Suite 510  |         |            | EMAIL              |
| (City)   | (State) | (Zip Code) |                    |
| Honolulu   | Hawai'i | 96817-5389 |                    |
| NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT |         |            | TELEPHONE          |
| Harry A. Saunders III  |         |            | (808) 548-4811     |
| MAILING ADDRESS (Street)   |         |            | FAX (808) 548-2980 |
| 680 Iwilei Road Suite 510  |         |            | EMAIL              |
| (City)   | (State) | (Zip Code) |                    |
| Honolulu   | Hawai'i | 96817-5389 |                    |

**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 checked="" type="checkbox"/> Tourism & Recreation                                 |
| <input 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 checked="" type="checkbox"/> Planning, Land & Water Use Management   | <input checked="" type="checkbox"/> Other: (indicate below)<br><u>Alternative Energy</u> |
| <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.*



(Signature of Lobbyist)

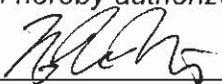
January 3, 2014

(Date)

**PART V AUTHORIZATION TO LOBBY**

|                                      |         |  |  |
|--------------------------------------|---------|--|--|
| NAME                                 |         | TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED |  |
| Richard K. Mirikitani                |         | Assistant<br>Senior Vice President & Secretary     |  |
| NAME OF ORGANIZATION (if applicable) |         | TELEPHONE  |  |
| Castle & Cooke Properties, Inc.      |         | (808) 548-4811                                     |  |
| MAILING ADDRESS (Street)             |         | FAX (808) 548-2975                                 |  |
| 680 Iwilei Road Suite 510            |         | EMAIL  |  |
| (City)                               | (State) | (Zip Code)   |  |
| Honolulu                             | Hawai'i | 96817-5389   |  |

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



(Signature of Authorizing Officer or Person Represented)

January 6, 2014

(Date)