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
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Web site: www.hawaii.gov/ethics

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STATE OF HAWAII
STATE ETHICS COMMISSION

NOTE: This is a public document.

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST

NAME (Last) Masatsugu	(First) Jeffrey	(Middle) S.	TELEPHONE 554-3406
MAILING ADDRESS (Street) P.O. Box 22534			FAX EMAIL jmas808@gmail.com
(City) Honolulu	(State) Hawaii		(Zip Code) 96823
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby) JM Consulting LLC			TELEPHONE 554-3406
MAILING ADDRESS (Street) P.O. Box 22534			FAX EMAIL jmas808@gmail.com
(City) Honolulu	(State) Hawaii		(Zip Code) 96823

PART II ORGANIZATION

NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) Painting Industry of Hawaii Labor Management Cooperation Trust Fund			TELEPHONE 808 523 9411
MAILING ADDRESS (Street) 222 South Vineyard Boulevard			FAX EMAIL
(City) Honolulu	(State) Hawaii		(Zip Code) 96813
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT Board of Trustees of the Painting Industry of Hawaii Labor Management Cooperation Trust Fund c/o Group			TELEPHONE 523-9411
MAILING ADDRESS (Street) Plan Administrators, Inc. 222 South Vineyard Boulevard			FAX EMAIL
(City) Honolulu	(State) Hawaii		(Zip Code) 96813

REC'D BY HAND DELIVERY

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

☐ Agriculture	☐ Education	☐ Human Services	☒ Science, Technology & Economic Development
☐ Communications & Public Utilities	☒ Government Operation & Finance	☒ Intergovernmental Relations, International Affairs	☐ Tourism & Recreation
☒ Consumer Protection & Commerce	☐ Hawaiian Affairs	☒ Labor & Employment	☐ Transportation
☐ Culture, Arts, Historic Preservation	☐ Health	☒ Planning, Land & Water Use Management	☐ Other: (indicate below)
☒ Ecology, Energy Environmental Protection	☒ Housing	☐ 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) — 1/13/14 (Date)

PART V AUTHORIZATION TO LOBBY

NAME: Ryden Valmoja

TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED: Business Manager / Secretary-Treasurer

NAME OF ORGANIZATION (if applicable): Painting Industry of Hawaii Labor Management Cooperation Trust Fund

TELEPHONE: 808 523-9411

MAILING ADDRESS (Street): 222 South Vineyard Boulevard

FAX:

EMAIL:

(City): Honolulu (State): Hawaii (Zip Code): 96813

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

(Signature of Authorizing Officer or Person Represented) — 1/15/14 (Date)