



**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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STATE OF HAWAII  
 STATE ETHICS COMMISSION

NOTE: This is a public document.

**LOBBYIST REGISTRATION FORM**

(Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Konkola	Lisa		808-524-4155
MAILING ADDRESS (Street)			FAX 808-524-0573
1000 Bishop Street, Suite 503			EMAIL lkonkola@hiadvocates.com
(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
BT Consulting, Inc. dba Advocates			same
MAILING ADDRESS (Street)			FAX
same			EMAIL
(City)	(State)	(Zip Code)	

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
Chamber of Commerce of Hawaii		808-545-4300
MAILING ADDRESS (Street)		FAX 808-545-4369
1132 Bishop Street, Suite 402		EMAIL
(City)	(State)	(Zip Code)
Honolulu	HI	96813
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
GERI WALKER		545-4300
MAILING ADDRESS (Street)		FAX 545-4369
1132 BISHOP ST., SUITE 402		EMAIL gwalker@coc.hawaii.org
(City)	(State)	(Zip Code)
HONOLULU,	HI	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 checked="" 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 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 type="checkbox"/> Planning, Land & Water Use Management              | <input checked="" type="checkbox"/> Other: (indicate below)<br><u>Taxation</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.

Jim Konrola

2/25/14

(Signature of Lobbyist)

(Date)

**PART V AUTHORIZATION TO LOBBY**

NAME <u>SHERRY MENOR-McNAMARA</u>	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED <u>PRESIDENT &amp; CEO</u>
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NAME OF ORGANIZATION (if applicable)  
Chamber of Commerce of Hawaii

TELEPHONE  
545-4300

MAILING ADDRESS (Street)  
1132 BISHOP ST., SUITE 402

FAX 545-4369

EMAIL  
Smenor-mcnamara@cochawaii.org

(City) HONOLULU, HI (State) 96813

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

[Signature]

2/24/14

(Signature of Authorizing Officer or Person Represented)

(Date)