



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

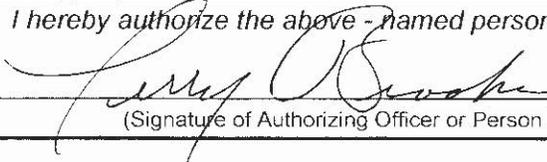
(Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Rosehill	Linda	K.	(808) 536-2611
MAILING ADDRESS (Street)			FAX (808) 524-2628
1088 Bishop Street, Suite 1010			EMAIL lrosehill@hawaii.rr.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
Rosehill & Associates			
MAILING ADDRESS (Street)			FAX
			EMAIL
(City)	(State)	(Zip Code)	

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Housing Solutions, Incorporated			808-222-5510
MAILING ADDRESS (Street)			FAX 808-973-0605
2734 S. King Street #100			EMAIL terry@hsiservices.net
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96826	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Gaye Johnston			808-973-0050
MAILING ADDRESS (Street)			FAX 808-973-0605
2734 S. King Street #100			EMAIL gaye@hsiservices.net
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96826	

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY			
<input type="checkbox"/> Agriculture	<input type="checkbox"/> Education	<input checked="" 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 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 type="checkbox"/> Other. (indicate below)
<input type="checkbox"/> Ecology, Energy Environmental Protection	<input checked="" 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>	
_____	_____
(Signature of Lobbyist)	(Date)

PART V AUTHORIZATION TO LOBBY		
NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
Terry Brooks	President	
NAME OF ORGANIZATION (if applicable)	TELEPHONE	
Housing Solutions, Incorporated	808-222-5510	
MAILING ADDRESS (Street)	FAX 808-973-0605	
2734 S. King Street #100	EMAIL terry@hsiservices.net	
(City)	(State)	(Zip Code)
Honolulu, HI	Hawaii	96826
<i>I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.</i>		
	_____	3 - 6 - 14
(Signature of Authorizing Officer or Person Represented)		(Date)