



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)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Carpenter	Dante	Keala	(808) 833-8163
MAILING ADDRESS (Street)			FAX
3053 Ala Poha Place, #401			EMAIL
			carpenterd@hawaiiantel.net
(City)	(State)	(Zip Code)	
Honolulu	HI	96818	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Carpenter & Carpenter, Inc.			(808) 833-8163
MAILING ADDRESS (Street)			FAX
3054 Ala Poha Place, #401			EMAIL
			carpenterd@hawaiiantel.net
(City)	(State)	(Zip Code)	
Honolulu	HI	96818	

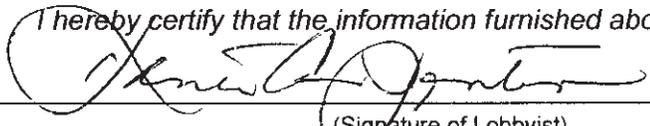
PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Capitol Consultants of Hawai'i			(808) 531-4551
MAILING ADDRESS (Street)			FAX (808) 533-4601
222 Vineyard Street, Suite 401			EMAIL
(City)	(State)	(Zip Code)	
Honolulu	HI	96813-2453	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
George A. (Red) Morris			(808) 531-4551
MAILING ADDRESS (Street)			FAX (808) 533-4601
222 Vineyard Street, Suite 40			EMAIL
(City)	(State)	(Zip Code)	
Honolulu	HI	96813-2453	

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

<input checked="" 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 checked="" 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) <u>Waste-to- Energy</u>
<input checked="" type="checkbox"/> Ecology, Energy Environmental Protection	<input type="checkbox"/> Housing	<input checked="" type="checkbox"/> Public Safety & Corrections	

PART IV CERTIFICATION OF LOBBYIST

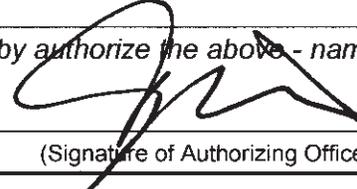
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

 _____ 6/16/2014 _____
 (Signature of Lobbyist) (Date)

PART V AUTHORIZATION TO LOBBY

NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
George A. (Red) Morris			
NAME OF ORGANIZATION (if applicable)		TELEPHONE	
Capitol Consultants of Hawai'i		(808) 53-4551	
MAILING ADDRESS (Street)		FAX (808) 533-4601	
222 Vineyard Street, Suite 401		EMAIL	
(City)	(State)	(Zip Code)	
Honolulu	HI	96813-2453	

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

 _____ 6/16/14 _____
 (Signature of Authorizing Officer or Person Represented) (Date)