

**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
 email: ethics@hawaiiethics.org
 Web site: www.hawaii.gov/ethics

THIS SPACE FOR OFFICE USE ONLY

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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
CHEAVENS JR.	TED	F	(808) 446-1371
MAILING ADDRESS (Street)			FAX
P O BOX 1450			EMAIL
			TJ@HALFHELEN.ORG
(City)	(State)	(Zip Code)	
KAHULUI	HI	96733	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
MAILING ADDRESS (Street)			FAX
			EMAIL
(City)	(State)	(Zip Code)	

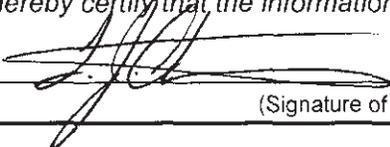
PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
HALF-HELEN FOUNDATION			(808) 446-1371
MAILING ADDRESS (Street)			FAX
P O BOX 1450			EMAIL
			INFO@HALFHELEN.ORG
(City)	(State)	(Zip Code)	
KAHULUI	HI	96733	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
CHELSEA ELLIOTT			(808) 446-1371
MAILING ADDRESS (Street)			FAX
P O BOX 1450			EMAIL
			CHELSEA@HALFHELEN.ORG
(City)	(State)	(Zip Code)	
KAHULUI	HI	96733	

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> Agriculture | <input checked="" 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 checked="" 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 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)

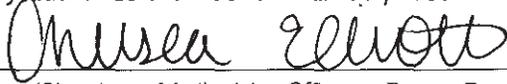
8/4/2014

(Date)

PART V AUTHORIZATION TO LOBBY

NAME CHELSEA ELLIOTT		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED EXECUTIVE DIRECTOR	
NAME OF ORGANIZATION (if applicable) HALF-HELEN ORGANIZATION		TELEPHONE (808) 446-1371	
MAILING ADDRESS (Street) P O BOX 1451		FAX	
(City) KAHULUI		(State) HI	EMAIL CHELSEA@HALFHELEN.ORG (Zip Code) 96733

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



(Signature of Authorizing Officer or Person Represented)

8.4.14

(Date)