



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

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NOTE: This is a public document.

**STATE OF HAWAII
LOBBYIST REGISTRATION FORM STATE ETHICS COMMISSION**

(Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Mac RAE	Bruce	D.D.	949.452.2082
MAILING ADDRESS (Street)			FAX 949.452.2046
25201 Paseo De Alicia, Suite 200			EMAIL bmacrae@ups.com
(City)	(State)	(Zip Code)	
Laguna Hills,	CA	92653	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
UPS			949.452.2010
MAILING ADDRESS (Street)			FAX 949.452.2046
25201 Paseo De Alicia, Suite 200			EMAIL jmattes@ups.com
(City)	(State)	(Zip Code)	
Laguna Hills,	CA	92653	

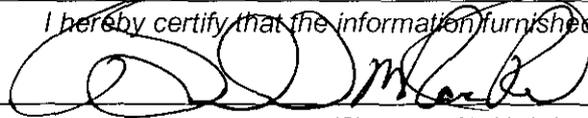
PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
UPS			949.452.2082
MAILING ADDRESS (Street)			FAX 949.452.2046
25201 Paseo De Alicia, Suite 200			EMAIL bmacrae@ups.com
(City)	(State)	(Zip Code)	
Laguna Hills,	CA	92653	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Bruce D. D. Mac RAE			949.452.2082
MAILING ADDRESS (Street)			FAX 949.452.2082
25201 Paseo De Alicia, Suite 200			EMAIL bmacrae@ups.com
(City)	(State)	(Zip Code)	
Laguna Hills,	CA	92653	

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 type="checkbox"/> Science, Technology & Economic Development |
| <input checked="" 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 type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input checked="" type="checkbox"/> Labor & Employment | <input checked="" 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 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.



 (Signature of Lobbyist)

12 / 03 / 12

 (Date)

PART V AUTHORIZATION TO LOBBY

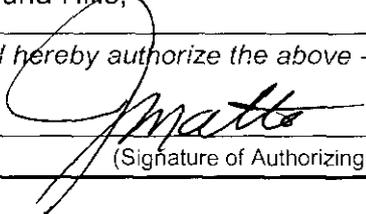
NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
Jerry Mattes	President, West Region

NAME OF ORGANIZATION (if applicable)	TELEPHONE
UPS	949.452.2010

MAILING ADDRESS (Street)	FAX
25201 Paseo De Alicia, Suite 200	949.452.2046
	EMAIL
	jimattes@ups.com

(City)	(State)	(Zip Code)
Laguna Hills,	CA	92653

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



 (Signature of Authorizing Officer or Person Represented)

12 / 13 / 12

 (Date)