



## 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.

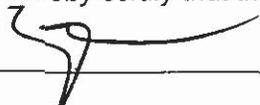
## LOBBYIST REGISTRATION FORM

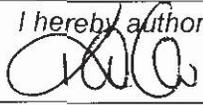
(Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Kanna	Nancy	Ann	808-652-0773
MAILING ADDRESS (Street)			FAX
P.O. Box 138			EMAIL
			<a href="mailto:nancykanna@gmail.com">nancykanna@gmail.com</a>
(City)	(State)	(Zip Code)	
Hanapepe	HI	96716	
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		
Kauai Board of Realtors	808-245-4049		
MAILING ADDRESS (Street)	FAX 808-246-0409		
4359 Kukui Grove Street, Suite 103	EMAIL		
(City)	(State)	(Zip Code)	
Lihue	HI	96766-2008	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT	TELEPHONE		
Karen Ono	808-245-4049		
MAILING ADDRESS (Street)	FAX 808-246-0409		
4359 Kukui Grove Street, Suite 103	EMAIL		
	<a href="mailto:kono@kauaiboard.com">kono@kauaiboard.com</a>		
(City)	(State)	(Zip Code)	
Lihue	HI	96766-2008	

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 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 checked="" 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>	
	10/14/15
(Signature of Lobbyist)	(Date)

PART V AUTHORIZATION TO LOBBY		
NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
Karen Ono	Executive Director	
NAME OF ORGANIZATION (if applicable)	TELEPHONE	
Kauai Board of Realtors	808-245-4049	
MAILING ADDRESS (Street)	FAX	
4359 Kukui Grove Street, Suite 103	808-246-0409	
	EMAIL	
	kono@kauaiboard.com	
(City)	(State)	(Zip Code)
Lihue	HI	96766-2008
<i>I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.</i>		
	10/14/2015	
(Signature of Authorizing Officer or Person Represented)	(Date)	