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
Nekoba	Devon	M.T.	808-227-4994
MAILING ADDRESS (Street)			FAX
1282 Akiahala Street			EMAIL jnekoba@hotmail.com
(City)	(State)		(Zip Code)
Kailua	Hawaii		96734
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
North West & Canada Cruise Ship Association			604-681-9515
MAILING ADDRESS (Street)			FAX
100-1111 W. Hastings Street			EMAIL dspalding@clia-nwc.com
(City)	(State)		(Zip Code)
Vancouver	BC		V6E 2J3 Canada

PART II ORGANIZATION

NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
North West & Canada Cruise Ship Association			604-681-9515
MAILING ADDRESS (Street)			FAX 604-681-4364
100-1111 W. Hastings Street			EMAIL
(City)	(State)		(Zip Code)
Vancouver	BC		V6E 2J3 Canada
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Donna Spalding			604-681-9515
MAILING ADDRESS (Street)			FAX 604-681-4364
same as above			EMAIL dspalding@clia-nwc.com
(City)	(State)		(Zip Code)

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

☐ Agriculture	☐ Education	☐ Human Services	☐ Science, Technology & Economic Development
☐ Communications & Public Utilities	☑ Government Operation & Finance	☑ Intergovernmental Relations, International Affairs	☑ Tourism & Recreation
☐ Consumer Protection & Commerce	☐ Hawaiian Affairs	☐ Labor & Employment	☑ Transportation
☐ Culture, Arts, Historic Preservation	☐ Health	☐ Planning, Land & Water Use Management	☐ Other: (indicate below)
☐ Ecology, Energy Environmental Protection	☐ Housing	☐ 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) — 1/5/16 (Date)

PART V AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
Donna Spalding	Director Administration

NAME OF ORGANIZATION (if applicable)	TELEPHONE
North West & Canada Cruise Ship Association	604-681-9515
MAILING ADDRESS (Street)	FAX 604-681-4364
100 - 1111 W. Hastings Street	EMAIL dspalding@clia-nwc.com

(City)	(State)	(Zip Code)
Vancouver	British Columbia, Canada	V6E 2J3

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

(Signature of Authorizing Officer or Person Represented) — Jan 5/2016 (Date)