



HAWAII STATE ETHICS COMMISSION
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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 |
| TAN | KAREN | | 8086813500 |
| MAILING ADDRESS (Street) | | | FAX |
| CHILD & FAMILY SERVICE, 91-1841 FT WEAVER RD | | | EMAIL |
| | | | KTAN@CFS-HAWAII.ORG |
| (City) | (State) | (Zip Code) | |
| EWA BEACH | HI | 96706 | |
| 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 |
| CHILD & FAMILY SERVICE | | | 8086813500 |
| MAILING ADDRESS (Street) | | | FAX |
| 91-1841 FT WEAVER RD | | | EMAIL |
| (City) | (State) | (Zip Code) | |
| EWA BEACH | HI | 96706 | |
| NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT | | | TELEPHONE |
| VIVIAN YASUNAGA | | | 8086813500 |
| MAILING ADDRESS (Street) | | | FAX |
| 91-1841 FT WEAVER RD | | | EMAIL |
| | | | VYASUNAGA@CFS-HAWAII.ORG |
| (City) | (State) | (Zip Code) | |
| EWA BEACH | HI | 96706 | |

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> Agriculture | <input 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 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.

Haun Tan

(Signature of Lobbyist)

1/15/14

(Date)

PART V AUTHORIZATION TO LOBBY

| | | | |
|--------------------------------------|---------|--|--|
| NAME | | TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED | |
| HOWARD GARVAL | | PRESIDENT & CEO | |
| NAME OF ORGANIZATION (if applicable) | | TELEPHONE | |
| CHILD & FAMILY SERVICE | | 8086813500 | |
| MAILING ADDRESS (Street) | | FAX | |
| 91-1841 FT WEAVER RD | | EMAIL | |
| (City) | (State) | (Zip Code) | |
| EWA BEACH | HI | 96706 | |

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

Howard Garval

(Signature of Authorizing Officer or Person Represented)

1/15/14

(Date)