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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STATE OF HAWAII
STATE ETHICS COMMISSION

NOTE: This is a public document.

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST

NAME (Last) Flocken	(First) Jeffrey	(Middle)	TELEPHONE 202-536-1904
MAILING ADDRESS (Street) 1350 Connecticut Ave NW, Suite 1220			FAX 202-296-3802 EMAIL jflocken@ifaw.org
(City) Washington	(State) DC		(Zip Code) 20036-1722
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) International Fund for Animal Welfare, Inc.		TELEPHONE 508-744-2000
MAILING ADDRESS (Street) 290 Summer Street		FAX 508-744-2039 EMAIL info-int@ifaw.org
(City) Yarmouth Port	(State) MA	(Zip Code) 02675
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT Ann Hale		TELEPHONE 508-744-2239
MAILING ADDRESS (Street) 290 Summer Street		FAX 508-744-2149 EMAIL ahale@ifaw.org
(City) Yarmouth Port	(State) MA	(Zip Code) 02675

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) Animal Welfare
☐ 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) JAN 26, 2016 (Date)

PART V AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
Daina Bray	Clerk

NAME OF ORGANIZATION (if applicable)	TELEPHONE
International Fund for Animal Welfare, Inc.	508-744-2147
MAILING ADDRESS (Street)	FAX 508-744-2039
290 Summer Street	EMAIL dbray@ifaw.org

(City)	(State)	(Zip Code)
Yarmouth Port	MA	02675

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

(Signature of Authorizing Officer or Person Represented) 1/26/15 (Date)