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)	(First)	(Middle)	TELEPHONE
Acosta	Michelle	D	808-522-0678
MAILING ADDRESS (Street)			FAX 808-524-2147
545 Queen Street, Suite 100			EMAIL michelle@vlsh.org
(City)	(State)		(Zip Code)
Honolulu	Hawaii		96813
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Volunteer Legal Services Hawaii			808-528-7050
MAILING ADDRESS (Street)			FAX 808-524-2147
545 Queen Street, Suite 100			EMAIL vlsh@vlsh.org
(City)	(State)		(Zip Code)
Honolulu	Hawaii		96813

PART II ORGANIZATION

NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
Volunteer Legal Services Hawaii		808-528-7050
MAILING ADDRESS (Street)		FAX 808-524-2147
545 Queen Street, Suite 100		EMAIL vlsh@vlsh.org
(City)	(State)	(Zip Code)
Honolulu	Hawaii	96813
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
Wendy Kojima		808-528-7050
MAILING ADDRESS (Street)		FAX 808-524-2147
545 Queen Street, Suite 100		EMAIL wendy@vlsh.org
(City)	(State)	(Zip Code)
Honolulu	Hawaii	96813

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

[ ] Agriculture	[ ] Education	[X] 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.

Michelle D. [signature] (Signature of Lobbyist) — Jan 30, 2016 (Date)

PART V AUTHORIZATION TO LOBBY

NAME: Ryan H. Engle

TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED: Board President

NAME OF ORGANIZATION (if applicable): Volunteer Legal Services Hawaii

TELEPHONE: (808) 523-9000

FAX: (808) 533-4184

MAILING ADDRESS (Street): 700 Bishop St., Ste. 900

EMAIL: rengle@legalhawaii.com

(City): Honolulu (State): Hawaii (Zip Code): 96813

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

[signature] (Signature of Authorizing Officer or Person Represented) — 1/29/16 (Date)