



HAWAII STATE ETHICS COMMISSION
 1001 BISHOP STREET, HONOLULU, HAWAII 96813
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 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
Arakaki	Gordon	M.	(808) 542-1542
MAILING ADDRESS (Street)			FAX
94-1176 Polinahe Place			EMAIL
			gordonarakaki@hawaiiantel.net
(City)	(State)	(Zip Code)	
Waipahu	Hawaii	96797	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Gordon M. Arakaki, Attorney at Law, LLC			(808) 542-1542
MAILING ADDRESS (Street)			FAX
94-1176 Polinahe Place			EMAIL
			gordonarakaki@hawaiiantel.net
(City)	(State)	(Zip Code)	
Waipahu	Hawaii	96797	

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)	TELEPHONE	
National Self Storage Association	(703) 575-8000	
MAILING ADDRESS (Street)	FAX	
1901 N. Beauregard St.	EMAIL	
(City)	(State)	(Zip Code)
Alexandria	Virginia	22311
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT	TELEPHONE	
Marcus C. Dunn	(703) 575-8000 x123	
MAILING ADDRESS (Street)	FAX 703-575-8901	
1901 N. Beauregard St.	EMAIL	
(City)	(State)	(Zip Code)
Alexandria	Virginia	22311

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 checked="" 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>I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.</i>	
<u>Gordon M. Akahi</u>	<u>February 8, 2016</u>
(Signature of Lobbyist)	(Date)

PART V AUTHORIZATION TO LOBBY		
NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
Marcus C. Dunn	Director, Government Relations	
NAME OF ORGANIZATION (if applicable)	TELEPHONE	
National Self Storage Association	(703) 575-8000 x123	
MAILING ADDRESS (Street)	FAX 703-575-8901	
1901 N. Beauregard St.	EMAIL	
	mdunn@selfstorage.org	
(City)	(State)	(Zip Code)
Alexandria	Virginia	22311
<i>I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.</i>		
<u>Marcus C. Dunn</u>	<u>8 FEB 16</u>	
(Signature of Authorizing Officer or Person Represented)	(Date)	