



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.

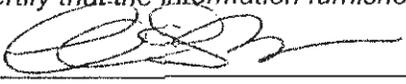
LOBBYIST REGISTRATION FORM

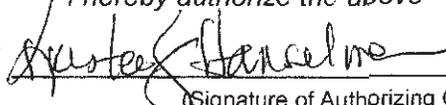
(Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
FERN	Christian	L.	(808)593-2157
MAILING ADDRESS (Street)			FAX (808)593-2160
1017 Palm Dr			EMAIL fern@uhpa.org
(City)	(State)	(Zip Code)	
Honolulu	HI	96814	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
University of Hawaii Professional Assembly			(808)593-2157
MAILING ADDRESS (Street)			FAX (808)593-2160
1017 Palm Dr			EMAIL kris@uhpa.org
(City)	(State)	(Zip Code)	
Honolulu	HI	96814	

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
University of Hawaii Professional Assembly			(808)593-2157
MAILING ADDRESS (Street)			FAX (808)593-2160
1017 Palm Dr			EMAIL kris@uhpa.org
(City)	(State)	(Zip Code)	
Honolulu	HI	96814	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Linda Sawai			(808)593-2157
MAILING ADDRESS (Street)			FAX (808)593-2160
1017 Palm Dr			EMAIL lsawai@uhpa.org
(City)	(State)	(Zip Code)	
Honolulu	HI	96814	

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY			
<input type="checkbox"/> Agriculture	<input checked="" 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 type="checkbox"/> Consumer Protection & Commerce	<input type="checkbox"/> Hawaiian Affairs	<input checked="" 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>	
	02/23/16
(Signature of Lobbyist)	(Date)

PART V AUTHORIZATION TO LOBBY			
NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
Kristeen Hanselman		Executive Director	
NAME OF ORGANIZATION (if applicable)		TELEPHONE	
University of Hawaii Professional Assembly		(808)593-2157	
MAILING ADDRESS (Street)		FAX (808)593-2160	
1017 Palm Dr		EMAIL kris@uhpa.org	
(City)	(State)	(Zip Code)	
Honolulu	HI	96814	
<i>I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.</i>			
		Feb 23, 2016	
(Signature of Authorizing Officer or Person Represented)		(Date)	