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) Nakamura	(First) Cheri	(Middle)
TELEPHONE 808-375-5066		
MAILING ADDRESS (Street) 1717 Mott-Smith Dr. #703		
FAX		
EMAIL cheri@hoecoalition.org		
(City) Honolulu	(State) HI	(Zip Code) 96822
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) Voice For Learning		
TELEPHONE 808-926-4771		
MAILING ADDRESS (Street) 4348 Waialae Ave. Suite 322		
FAX 808-926-4779		
EMAIL		
(City) Honolulu	(State) HI	(Zip Code) 96816
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT William Reeves		
TELEPHONE 808-926-4771		
MAILING ADDRESS (Street) 4348 Waialae Ave. Suite 322		
FAX 808-926-4779		
EMAIL breeves@voiceforlearning.org		
(City) Honolulu	(State) HI	(Zip Code) 96816

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)
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.

Alex Nakamura — 3/7/2016

(Signature of Lobbyist) (Date)

PART V AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
William Reeves	President

NAME OF ORGANIZATION (if applicable)	TELEPHONE
Voice for Learning	808-926-4771
MAILING ADDRESS (Street)	FAX 808-926-4779
4348 Waialae Ave. Suite 322	EMAIL breeves@voiceforlearning.org

(City)	(State)	(Zip Code)
Honolulu	HI	96816

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

3/7/2016

(Signature of Authorizing Officer or Person Represented) (Date)