



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.

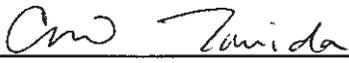
LOBBYIST REGISTRATION FORM

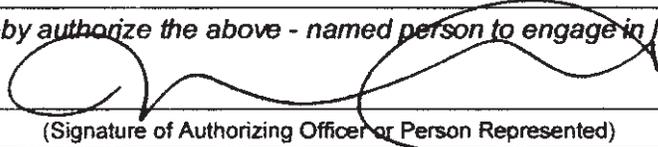
(Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Tanida	Corie	I	(808) 275-6275
MAILING ADDRESS (Street)			FAX
307A Kamani Street			EMAIL
			ctanida@commoncause.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
Common Cause			(202) 833-1200
MAILING ADDRESS (Street)			FAX
805 15th Street, NW, Suite 800			EMAIL
(City)	(State)	(Zip Code)	
Washington	DC	20005	

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Common Cause			(202) 833-1200
MAILING ADDRESS (Street)			FAX
805 15th Street, NW, Suite 800			EMAIL
(City)	(State)	(Zip Code)	
Washington	DC	2005	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Corie Tandia			(808) 275-6275
MAILING ADDRESS (Street)			FAX
307A Kamani Street			EMAIL
			ctanida@commoncause.org
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96813	

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 checked="" 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 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 checked="" type="checkbox"/> Other: (indicate below) <u>Ethics, Campaign</u>
<input type="checkbox"/> Ecology, Energy Environmental Protection	<input type="checkbox"/> Housing	<input type="checkbox"/> Public Safety & Corrections	<u>Fin</u>

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></u>	<u>8/9/16</u>
(Signature of Lobbyist)	(Date)

PART V AUTHORIZATION TO LOBBY			
NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
Marilyn Carpenteyro		Director of State Operations	
NAME OF ORGANIZATION (if applicable)		TELEPHONE	
Common Cause		(202) 736-5737	
MAILING ADDRESS (Street)		FAX	
805 15th Street, NW, Suite 800		EMAIL	
(City)	(State)	(Zip Code)	
Washington	DC	20005	
<i>I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.</i>			
<u></u>		<u>8/9/16</u>	
(Signature of Authorizing Officer or Person Represented)		(Date)	