



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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Web site: www.hawaii.gov/ethics

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16 OCT 10 AM 10:02

NOTE: This is a public document.

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Suga-Nakagawa	Audrey	C	808 545-6005
MAILING ADDRESS (Street)			FAX 808 537-2288
1132 Bishop Street, Suite 1920			EMAIL asuga-nakagawa@aarp.org
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	93813	
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)	

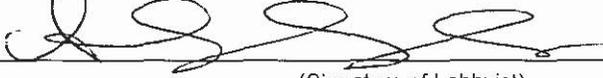
PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
AARP Hawaii			808 545-6000
MAILING ADDRESS (Street)			FAX 808 537-2288
1132 Bishop Street, Suite 1920			EMAIL asuga-nakagawa@aarp.org
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96813	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Audrey Suga-Nakagawa			808 545-6005
MAILING ADDRESS (Street)			FAX 808 537-2288
1132 Bishop Street, Suite 1920			EMAIL asuga-nakagawa@aarp.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 checked="" 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 checked="" type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input checked="" 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 checked="" type="checkbox"/> Housing | <input type="checkbox"/> 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.



(Signature of Lobbyist)

10-5-16

(Date)

PART V AUTHORIZATION TO LOBBY

NAME Barbara Kim Stanton		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED State Director	
NAME OF ORGANIZATION (if applicable) AARP Hawaii		TELEPHONE 808 545-6001	
MAILING ADDRESS (Street) 1132 Bishop Street, Suite 1920		FAX 808 545-6001	
(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 of Authorizing Officer or Person Represented)

10/5/16

(Date)