



**HAWAII STATE ETHICS COMMISSION**  
 1001 BISHOP STREET, HONOLULU, HAWAII 96813  
 or P.O. BOX 616, HONOLULU, HAWAII 96809  
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15 JAN -7 A11 :25

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
Sakamoto	Sheri	N	(808) 592-4200
MAILING ADDRESS (Street)			FAX
210 Ward Avenue, Suite 121			EMAIL
			<a href="mailto:ssakamoto@rmhawaii.org">ssakamoto@rmhawaii.org</a>
(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
MAILING ADDRESS (Street)			FAX
			EMAIL
(City)	(State)	(Zip Code)	

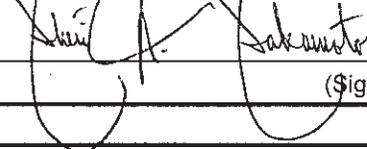
PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Retail Merchants of Hawaii			(808) 592-4200
MAILING ADDRESS (Street)			FAX
210 Ward Avenue, Suite 121			EMAIL
			<a href="mailto:ssakamoto@rmhawaii.org">ssakamoto@rmhawaii.org</a>
(City)	(State)	(Zip Code)	
Honolulu	HI	96814	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Sheri Sakamoto			(808) 592-4200
MAILING ADDRESS (Street)			FAX
210 Ward Avenue, Suite 121			EMAIL
			<a href="mailto:ssakamoto@rmhawaii.org">ssakamoto@rmhawaii.org</a>
(City)	(State)	(Zip Code)	
Honolulu	HI	96817	

**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 checked="" type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities         | <input checked="" type="checkbox"/> Government Operation & Finance | <input checked="" type="checkbox"/> Intergovernmental Relations, International Affairs | <input checked="" type="checkbox"/> Tourism & Recreation                       |
| <input checked="" 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 checked="" 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 hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.



12/31/2014

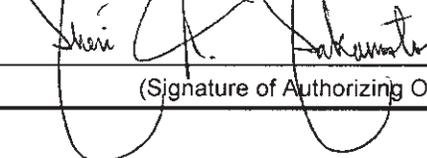
(Signature of Lobbyist)

(Date)

**PART V AUTHORIZATION TO LOBBY**

NAME Sheri N. Sakamoto		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED President	
NAME OF ORGANIZATION (if applicable) Retail Merchants of Hawaii		TELEPHONE (808) 592-4200	
MAILING ADDRESS (Street) 210 Ward Avenue, Suite 121		FAX	
		EMAIL ssakamoto@rmhawaii.org	
(City) Honolulu	(State) Hawaii	(Zip Code) 96814	

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



12/31/2014

(Signature of Authorizing Officer or Person Represented)

(Date)