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
Kimura	Joy	Y.N.	(808) 845-3238 ext. 3
MAILING ADDRESS (Street)			FAX (808) 845-8300
650 Iwilei Road, Suite 285			EMAIL jkimuralecet@hawaii.rr.com
(City)	(State)		(Zip Code)
Honolulu	Hawaii		96817
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
Hawaii Laborers-Employers Cooperation and Education Trust		(808) 845-3238 ext. 3
MAILING ADDRESS (Street)		FAX (808) 845-8300
650 Iwilei Road, Suite 285		EMAIL jkimuralecet@hawaii.rr.com
(City)	(State)	(Zip Code)
Honolulu	Hawaii	96817
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
Joy Y.N. Kimura		(808) 845-3238 ext. 3
MAILING ADDRESS (Street)		FAX (808) 845-8300
650 Iwilei Road, Suite 285		EMAIL jkimuralecet@hawaii.rr.com
(City)	(State)	(Zip Code)
Honolulu	Hawaii	96817

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.

Joyce M. Kimura — (Signature of Lobbyist)

1/2/15 — (Date)

PART V AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
Clyde T. Hayashi	Director

NAME OF ORGANIZATION (if applicable)	TELEPHONE
Hawaii Laborers-Employers Cooperation and Education Trust	(808) 845-3238 ext. 1
MAILING ADDRESS (Street)	FAX (808) 845-8300
650 Iwilei Road, Suite 285	EMAIL

(City)	(State)	(Zip Code)
Honolulu	HI	96817

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

(Signature of Authorizing Officer or Person Represented)

1-2-15 — (Date)