



HAWAII STATE ETHICS COMMISSION
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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
Yamachika	Thomas		536-4587
MAILING ADDRESS (Street)			FAX 536-4588
126 Queen St., #304			EMAIL tom@tfhawaii.org
(City)	(State)	(Zip Code)	
Honolulu	HI	96813	
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		
Tax Foundation of Hawaii	536-4587		
MAILING ADDRESS (Street)	FAX 536-4588		
126 Queen St., #304	EMAIL tfh@tfhawaii.org		
(City)	(State)	(Zip Code)	
Honolulu	HI	96813	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT	TELEPHONE		
Justina Desuacido	536-4587		
MAILING ADDRESS (Street)	FAX 536-4588		
126 Queen St., #304	EMAIL tfh@tfhawaii.org		
(City)	(State)	(Zip Code)	
Honolulu	HI	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 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.

Thomas Yamachika
(Signature of Lobbyist)

1/2/15

(Date)

PART V AUTHORIZATION TO LOBBY

NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
Thomas Yamachika		President	
NAME OF ORGANIZATION (if applicable)		TELEPHONE	
Tax Foundation of Hawaii		536-4587	
MAILING ADDRESS (Street)		FAX 536-4588	
126 Queen St. #304		EMAIL	
		tfh@tfhawaii.org	
(City)	(State)	(Zip Code)	
Honolulu	HI	96813	

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

Thomas Yamachika
(Signature of Authorizing Officer or Person Represented)

1/2/15

(Date)