



## 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](mailto:ethics@hawaiiethics.org)

Web site: [www.hawaii.gov/ethics](http://www.hawaii.gov/ethics)

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STATE OF HAWAII  
STATE ETHICS COMMISSION

NOTE: This is a public document.

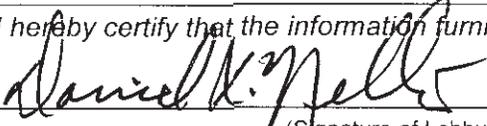
## LOBBYIST REGISTRATION FORM

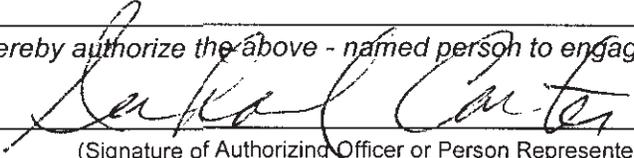
(Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Nellis	Daniel	X	808-621-3201
MAILING ADDRESS (Street)			FAX 808-621-7410
1116 Whitmore Avenue			EMAIL dan.nellis@dole.com
(City)	(State)	(Zip Code)	
Wahiawa	HI	96786	
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
Dole Food Company Hawaii, a division of Dole Food Company, Inc.			808-621-3201
MAILING ADDRESS (Street)			FAX 808-621-7410
1116 Whitmore Avenue			EMAIL dan.nellis@dole.com
(City)	(State)	(Zip Code)	
Wahiawa	HI	96786	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Gail Mun			808-621-3203
MAILING ADDRESS (Street)			FAX 808-621-7410
1116 Whitmore Avenue			EMAIL gail.mun@dole.com
(City)	(State)	(Zip Code)	
Wahiawa	HI	96786	

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY			
<input checked="" 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 type="checkbox"/> Government Operation & Finance	<input type="checkbox"/> Intergovernmental Relations, International Affairs	<input checked="" type="checkbox"/> Tourism & Recreation
<input type="checkbox"/> Consumer Protection & Commerce	<input type="checkbox"/> Hawaiian Affairs	<input checked="" type="checkbox"/> Labor & Employment	<input checked="" type="checkbox"/> Transportation
<input checked="" type="checkbox"/> Culture, Arts, Historic Preservation	<input type="checkbox"/> Health	<input checked="" type="checkbox"/> Planning, Land & Water Use Management	<input type="checkbox"/> Other: (indicate below)
<input checked="" type="checkbox"/> Ecology, Energy Environmental Protection	<input checked="" type="checkbox"/> Housing	<input type="checkbox"/> Public Safety & Corrections	_____

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>12-30-14</u>
(Signature of Lobbyist)	(Date)

PART V AUTHORIZATION TO LOBBY		
NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
<u>C. MICHAEL CARTER</u>	<u>PRESIDENT AND CHIEF OPERATING OFFICER</u>	
NAME OF ORGANIZATION (if applicable)	TELEPHONE	
<u>Dole Food Company Hawaii, a division of Dole Food Company, Inc.</u>	<u>808-621-3200</u>	
MAILING ADDRESS (Street)	FAX	
<u>1116 Whitmore Avenue</u>	<u>808-621-7410</u>	
	EMAIL	
(City)	(State)	(Zip Code)
<u>Wahiawa</u>	<u>HI</u>	<u>96786</u>
<i>I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.</i>		
	<u>1/5/15</u>	
(Signature of Authorizing Officer or Person Represented)	(Date)	