



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
Saunders	Harry	A	808-548-4811
MAILING ADDRESS (Street)			FAX 808-548-2975
680 Iwilei Road, Box 510			EMAIL
(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
Castle & Cooke Hawaii			808-548-4811
MAILING ADDRESS (Street)			FAX 808-548-2975
680 Iwilei Road, Box 510			EMAIL
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96817	

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Castle & Cooke Homes Hawaii, Inc.			808-548-4811
MAILING ADDRESS (Street)			FAX 808-548-2975
680 Iwilei Road, Box 510			EMAIL
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96817	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Harry A. Saunders			808-548-4811
MAILING ADDRESS (Street)			FAX 808-548-2975
680 Iwilei Road, Box 510			EMAIL
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96817	

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 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 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 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 hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.



(Signature of Lobbyist)

JAN 05 2015

(Date)

PART V AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
Troy T. Fukuhara	Vice President & Assistant Secretary

NAME OF ORGANIZATION (if applicable)
Castle & Cooke Homes Hawaii, Inc.

TELEPHONE
808-548-4811

MAILING ADDRESS (Street)
680 Iwilei Road, Box 510

FAX 808-548-2975

EMAIL

(City)

(State)

(Zip Code)

Honolulu

Hawaii

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)

JAN 05 2015

(Date)