



## 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   |
| Nip   | Celeste | Y.K.       | (808) 531-4551  |
| MAILING ADDRESS (Street)  |         |            | FAX (808) 533-4601  |
| 222 South Vineyard Street, Suite 401  |         |            | EMAIL<br><a href="mailto:nipfire@hawaii.rr.com">nipfire@hawaii.rr.com</a> |
| (City)  | (State) | (Zip Code) |   |
| Honolulu  | HI      | 96813-2453 |   |
| EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby) |         |            | TELEPHONE   |
| Capitol Consultants of Hawaii, LLP.   |         |            | (808) 531-4551  |
| MAILING ADDRESS (Street)  |         |            | FAX (808) 533-4601  |
| 222 South Vineyard Street, Suite 401  |         |            | EMAIL<br><a href="mailto:nipfire@hawaii.rr.com">nipfire@hawaii.rr.com</a> |
| (City)  | (State) | (Zip Code) |   |
| Honolulu  | HI      | 96813      |   |

| PART II ORGANIZATION   |         |            |   |
|--|---------|------------|---|
| NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)                         |         |            | TELEPHONE   |
| Host Hotels & Resorts, L.P.  |         |            | (240) 744-1000  |
| MAILING ADDRESS (Street)   |         |            | FAX (240) 744-5494  |
| 6903 Rockledge Drive   |         |            | EMAIL   |
| (City)   | (State) | (Zip Code) |   |
| Bethesda   | MD      | 20817      |   |
| NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT |         |            | TELEPHONE   |
| Melody Butay Dacanay   |         |            | (808) 531-4551  |
| MAILING ADDRESS (Street)   |         |            | FAX (808) 533-4601  |
| 222 South Vineyard Street, Suite 401   |         |            | EMAIL<br><a href="mailto:mbutay@aol.com">mbutay@aol.com</a> |
| (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.*

*Jeffrey S. Clark*

*1.20.15*

(Signature of Lobbyist)

(Date)

**PART V AUTHORIZATION TO LOBBY**

|                  |  |
|------------------|--|
| NAME             | TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED |
| Jeffrey S. Clark | Senior Vice President                              |

|                                      |                |
|--------------------------------------|----------------|
| NAME OF ORGANIZATION (if applicable) | TELEPHONE      |
| Host Hotels & Resorts, L.P.          | (240) 744-1000 |

|                          |                    |
|--------------------------|--------------------|
| MAILING ADDRESS (Street) | FAX (240) 744-5494 |
| 6903 Rockledge Drive     | EMAIL              |

|          |         |            |
|----------|---------|------------|
| (City)   | (State) | (Zip Code) |
| Bethesda | MD      | 20817      |

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

*Jeffrey S. Clark*

*1/14/15*

(Signature of Authorizing Officer or Person Represented)

(Date)