



HAWAII STATE ETHICS COMMISSION

1001 BISHOP STREET, HONOLULU, HAWAII 96813

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TEL: (808) 587-0460 FAX: (808) 587-0470

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STATE OF HAWAII
STATE ETHICS COMMISSION

NOTE: This is a public document.

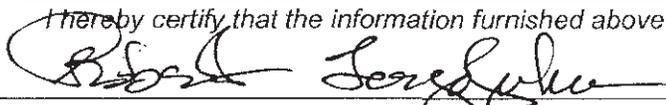
LOBBYIST REGISTRATION FORM

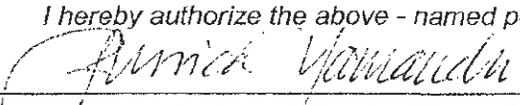
(Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Toyofuku	Robert	S.	808-524-4155
MAILING ADDRESS (Street)			FAX 808-524-0573
1000 Bishop Street, Ste. 503			EMAIL toyofuku@hiadvocates.com
(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
BT Consulting, Inc. dba Advocates			same
MAILING ADDRESS (Street)			FAX
same			EMAIL
(City)	(State)	(Zip Code)	

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Coalition for a Tobacco Free Hawaii			808-591-6508 x-203
MAILING ADDRESS (Street)			FAX 808-946-6197
850 Richards St., #201			EMAIL jessica@tobaccofreehawaii.org
(City)	(State)	(Zip Code)	
Honolulu	HI	96813	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Jessica Yamauchi			
MAILING ADDRESS (Street)			FAX
same			EMAIL
(City)	(State)	(Zip Code)	

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 checked="" 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 checked="" 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>I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.</i>	
	<u>1-27-2015</u>
(Signature of Lobbyist)	(Date)

PART V AUTHORIZATION TO LOBBY	
NAME Jessica Yamauchi	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
NAME OF ORGANIZATION (if applicable) Coalition for a Tobacco Free Hawaii	TELEPHONE 808-591-6508 x-203
MAILING ADDRESS (Street) 850 Richards St., #201	FAX 808-946-6197
(City) Honolulu	EMAIL jessica@tobaccofreehawaii.org
(State) HI	(Zip Code) 96813
<i>I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.</i>	
	<u>1/22/15</u>
(Signature of Authorizing Officer or Person Represented)	(Date)