

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
Web site: 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
Kuioka	Alton	T.	(808) 694-8768
MAILING ADDRESS (Street)			FAX (808) 521-7602
P. O. Box 2900			EMAIL alton.kuioka@boh.com
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96846-6000	
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)	

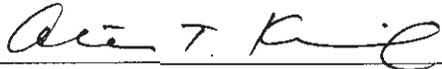
PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Bank of Hawaii Corporation			(808) 694-4438
MAILING ADDRESS (Street)			FAX (808) 694-4304
P. O. Box 2900			EMAIL joy.alameda@boh.com
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96846-6000	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Joy S. Alameda			(808) 694-4438
MAILING ADDRESS (Street)			FAX (808) 694-4304
P. O. Box 2900			EMAIL joy.alameda@boh.com
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96846-6000	

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 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 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.

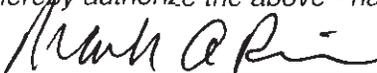


1/21/2015

(Signature of Lobbyist)

(Date)

PART V AUTHORIZATION TO LOBBY

NAME Mark A. Rossi		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED Vice Chairman	
NAME OF ORGANIZATION (if applicable) Bank of Hawaii		TELEPHONE (808) 694-8822	
MAILING ADDRESS (Street) P. O. Box 2900		FAX (808) 521-7602	
		EMAIL	
(City) Honoulu	(State) Hawaii	(Zip Code) 96846-6000	
<i>I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.</i>			
		<u>1/21/2015</u>	
(Signature of Authorizing Officer or Person Represented)		(Date)	