



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) Yajima	(First) Tiffany	(Middle) N.	TELEPHONE 808-539-0400
MAILING ADDRESS (Street) First Hawaiian Center, 999 Bishop Street, Suite 1400			FAX 808-533-4945
(City) Honolulu			(State) HI
			(Zip Code) 96813
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby) Slovin & Ito LLP			TELEPHONE 808-539-0400
MAILING ADDRESS (Street) First Hawaiian Center, 999 Bishop Street, Suite 1400			FAX 808-533-4945
(City) Honolulu			(State) Hawaii
			(Zip Code) 96813

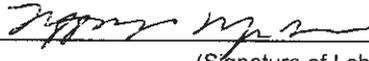
PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) DISH Network L.L.C.			TELEPHONE (202) 293-0981
MAILING ADDRESS (Street) 1110 Vermont Avenue NW, Suite 750			FAX
(City) Washington			(State) D.C.
			(Zip Code) 20005
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT Carrie E. Castro			TELEPHONE 703/684-1110
MAILING ADDRESS (Street) MultiState Associates, Inc., 515 King St., Suite 300			FAX Fax: 703/684-0717
(City) Alexandria			(State) VA
			(Zip Code) 22314

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 checked="" 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.



(Signature of Lobbyist)

1/23/15

(Date)

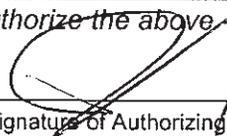
PART V AUTHORIZATION TO LOBBY

NAME Jeffrey Blum	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED Sr. Vice President & Deputy General Counsel
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NAME OF ORGANIZATION (if applicable) DISH Network L.L.C.	TELEPHONE (202) 293-0981
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MAILING ADDRESS (Street) 1110 Vermont Avenue NW, Suite 750	FAX	EMAIL jeffrey.blum@dishnetwork.com
(City) Washington	(State) D.C.	(Zip Code) 20005

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


(Signature of Authorizing Officer or Person Represented)

1/20/15
(Date)