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
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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
Chong	Pono		(808) 545-4300
MAILING ADDRESS (Street)			FAX (808) 545-4369
1132 Bishop Street #2105			EMAIL pchong@cochawaii.org
(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
Chamber of Commerce Hawaii			(808) 545-4300
MAILING ADDRESS (Street)			FAX (808) 545-4369
1132 Bishop Street #2105			EMAIL pchong@cochawaii.org
(City)	(State)		(Zip Code)
Honolulu	HI		96813

PART II ORGANIZATION

NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
Chamber of Commerce Hawaii		(808) 545-4300
MAILING ADDRESS (Street)		FAX (808) 545-4369
1132 Bishop Street #2105		EMAIL pchong@cochawaii.org
(City)	(State)	(Zip Code)
Honolulu	HI	96813
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
Jennifer Domaloan		(808) 545-4300
MAILING ADDRESS (Street)		FAX (808) 545-4369
1132 Bishop Street #2105		EMAIL jdomaloan@cochawaii.org
(City)	(State)	(Zip Code)
Honolulu	HI	96813

REC'D BY HAND DELIVERY

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

☑ Agriculture	☑ Education	☑ Human Services	☑ Science, Technology & Economic Development
☑ Communications & Public Utilities	☑ Government Operation & Finance	☑ Intergovernmental Relations, International Affairs	☑ Tourism & Recreation
☑ Consumer Protection & Commerce	☑ Hawaiian Affairs	☑ Labor & Employment	☑ Transportation
☑ Culture, Arts, Historic Preservation	☑ Health	☑ Planning, Land & Water Use Management	☑ Other: (indicate below)
☑ Ecology, Energy Environmental Protection	☑ Housing	☑ 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) 1/26/15 (Date)

PART V AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
Sherry Menor-McNamara	President and CEO

NAME OF ORGANIZATION (if applicable)	TELEPHONE
Chamber of Commerce Hawaii	(808) 545-4300
MAILING ADDRESS (Street)	FAX (808) 545-4369
1132 Bishop Street #2105	EMAIL smenor-mcnamara@cochawaii.org

(City)	(State)	(Zip Code)
Honolulu	HI	96813

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

(Signature of Authorizing Officer or Person Represented) 1/26/15 (Date)