



HAWAII STATE ETHICS COMMISSION

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NOTE: This is a public document.

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Kido	C.	Mike	539-0400
MAILING ADDRESS (Street)			FAX 533-4945
999 Bishop Street, Suite 1400			EMAIL
			cmkido@awlaw.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
Slovin & Ito, LLP			539-0400
MAILING ADDRESS (Street)			FAX 533-4945
999 Bishop Street, Suite 1400			EMAIL
(City)	(State)	(Zip Code)	
Honolulu	HI	96813	

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
Consumer Data Industry Association		202-408-7407
MAILING ADDRESS (Street)		FAX 202-371-0134
1090 Vermont Ave, N.W., Suite 200		EMAIL
(City)	(State)	(Zip Code)
Washington DC		20005
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
Eric Ellman		202-408-7407
MAILING ADDRESS (Street)		FAX 202-371-0134
1090 Vermont Ave, N.W., Suite 200		EMAIL
		eellman@cdiaonline.org
(City)	(State)	(Zip Code)
Washington DC		20005

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 checked="" 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>I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.</i>	
<u>C Mike Kido</u>	<u>Jan 23, 2015</u>
(Signature of Lobbyist)	(Date)

PART V AUTHORIZATION TO LOBBY	
NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
Eric Ellman	
NAME OF ORGANIZATION (if applicable)	TELEPHONE
Consumer Data Industry Association	202-408-7407
MAILING ADDRESS (Street)	FAX
1090 Vermont Ave, N.W., Suite 200	202-371-0134
(City)	EMAIL
Washington DC	eellman@cdiaonline.org
(State)	(Zip Code)
	20005
<i>I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.</i>	
<u>[Signature]</u>	<u>1/15/2015</u>
(Signature of Authorizing Officer or Person Represented)	(Date)