



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)	(First)	(Middle)	TELEPHONE
Hamm	Joanne (Nonie)	Toledo	(808) 372-4444
MAILING ADDRESS (Street)			FAX (866) 591-1546
PO Box 283007			EMAIL nonie@toledoassociates.com
(City)	(State)	(Zip Code)	
Honolulu	HI	96828	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Nonie Toledo & Associates			(808) 372-4444
MAILING ADDRESS (Street)			FAX (866) 591-1546
PO Box 283007			EMAIL
(City)	(State)	(Zip Code)	
Honolulu	HI	96828	

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Sempra Energy			(619) 696-2000
MAILING ADDRESS (Street)			FAX (619) 696-2403
101 Ash St.			EMAIL
(City)	(State)	(Zip Code)	
San Diego	CA	92101	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Lisa Briggs			(619) 696-2000
MAILING ADDRESS (Street)			FAX (619) 696-2403
101 Ash St.			EMAIL
(City)	(State)	(Zip Code)	
San Diego	CA	92101	

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 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 checked="" 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><i>Gene Horiuchi</i></u> (Signature of Lobbyist)	<u>11/30/15</u> (Date)

PART V AUTHORIZATION TO LOBBY		
NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
Lisa Briggs		
NAME OF ORGANIZATION (if applicable)	TELEPHONE	
Sempra Energy	(619) 696-2000	
MAILING ADDRESS (Street)	FAX	
101 Ash St.	(619) 696-2403	
	EMAIL	
(City)	(State)	(Zip Code)
San Diego	CA	92101
<i>I hereby authorize the above named person to engage in lobbying activities on behalf of the undersigned.</i>		
<u><i>[Signature]</i></u> (Signature of Authorizing Officer or Person Represented)	<u>11/30/15</u> (Date)	