



**HAWAII STATE ETHICS COMMISSION**  
 1001 BISHOP STREET, HONOLULU, HAWAII 96813  
 or P.O. BOX 616, HONOLULU, HAWAII 96809  
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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
Piltz	Karen	M.L.	808-528-8200
MAILING ADDRESS (Street)			FAX 808-536-5869
745 Fort St., 9th Floor			EMAIL kpiltz@chunkerr.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
Chun Kerr LLP			808-528-8200
MAILING ADDRESS (Street)			FAX 808-536-5869
745 Fort St., 9th Floor			EMAIL
(City)	(State)	(Zip Code)	
Honolulu	HI	96813	

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Savio Growth Venture LLC			808-951-8977
MAILING ADDRESS (Street)			FAX 808-946-3224
1451 S. King St., #504			EMAIL
(City)	(State)	(Zip Code)	
Honolulu	HI	96814	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Phyllis Savio			808-951-8977
MAILING ADDRESS (Street)			FAX 808-946-3224
1451 S. King St., #504			EMAIL
(City)	(State)	(Zip Code)	
Honolulu	HI	96814	

**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 checked="" type="checkbox"/> Government Operation & Finance | <input checked="" type="checkbox"/> Intergovernmental Relations, International Affairs | <input checked="" 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 checked="" type="checkbox"/> Culture, Arts, Historic Preservation     | <input type="checkbox"/> Health                                    | <input checked="" 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 hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.*

  
 \_\_\_\_\_  
 (Signature of Lobbyist)

1/27/2015  
 \_\_\_\_\_  
 (Date)

**PART V AUTHORIZATION TO LOBBY**

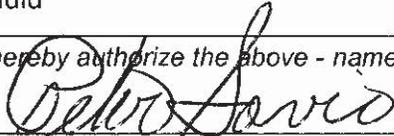
NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
Peter Savio	Manager

NAME OF ORGANIZATION (if applicable)	TELEPHONE
Savio Growth Venture LLC	808-951-8977

MAILING ADDRESS (Street)	FAX 808-946-3224
1451 S. King St., #504	EMAIL

(City)	(State)	(Zip Code)
Honolulu	HI	96814

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

  
 \_\_\_\_\_  
 (Signature of Authorizing Officer or Person Represented)

1/27/2015  
 \_\_\_\_\_  
 (Date)