



HAWAII STATE ETHICS COMMISSION
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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
Steiner	Mary		225-4563
MAILING ADDRESS (Street)			FAX
2169 AHAKU PLACE			EMAIL
(City)	(State)	(Zip Code)	MMSteiner@hawaii.rr.com
Honolulu	HI	96821	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
MAILING ADDRESS (Street)			FAX
			EMAIL
(City)	(State)	(Zip Code)	

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Hawaiian Humane Society			356-2200
MAILING ADDRESS (Street)			FAX
2700 Waiālae Avenue			955-16034
(City)	(State)	(Zip Code)	EMAIL
Honolulu	Hawaii	96826	hhsc@hawaiianhumane.org
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Pamela Burns			356-2202
MAILING ADDRESS (Street)			FAX
2700 Waiālae Avenue			EMAIL
(City)	(State)	(Zip Code)	Pburns@hawaiianhumane.org
Honolulu	Hawaii	96826	

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

<input checked="" 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 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 checked="" 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.

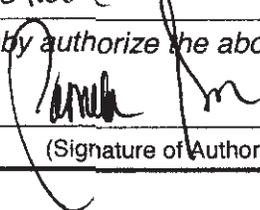


1-26-15

(Signature of Lobbyist)

(Date)

PART V AUTHORIZATION TO LOBBY

NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
NAME OF ORGANIZATION (if applicable)		TELEPHONE	
Hawaiian Humane Society		356-2202	
MAILING ADDRESS (Street)		FAX	
2700 Waiialae Avenue		EMAIL	
(City)	(State)	(Zip Code)	
Honolulu	HI	96826	
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.			
		1-27-15	
(Signature of Authorizing Officer or Person Represented)		(Date)	