



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
email: ethics@hawaiiethics.org
Web site: www.hawaii.gov/ethics

THIS SPACE FOR OFFICE USE ONLY

'15 FEB -9 P2 :04

NOTE: This is a public document.

LOBBYIST REGISTRATION FORM STATE OF HAWAII ETHICS COMMISSION

(Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
RIBELLIA	KIMBERLY	LEE	808-348-20121
MAILING ADDRESS (Street)			FAX
1075 OPAKAPAKA STREET			EMAIL
			KIMBERLY@HOEISF.COM
(City)	(State)	(Zip Code)	
KAPOLEI	HI	96707	
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
Hawaii Operating Engineers Industry Stabilization Fund			808-845-6221
MAILING ADDRESS (Street)			FAX
1075 OPAKAPAKA STREET			EMAIL
(City)	(State)	(Zip Code)	
KAPOLEI	HI	96707	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
DAROLEE PREWITT			808-845-6221
MAILING ADDRESS (Street)			FAX
1075 OPAKAPAKA STREET			EMAIL
(City)	(State)	(Zip Code)	
KAPOLEI	HI	96707	

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 checked="" 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 checked="" type="checkbox"/> Labor & Employment	<input type="checkbox"/> Transportation
<input 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 type="checkbox"/> Ecology, Energy Environmental Protection	<input checked="" type="checkbox"/> Housing	<input checked="" 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>Kumbuley Beullia</i></u>	<u>2/6/15</u>
(Signature of Lobbyist)	(Date)

PART V AUTHORIZATION TO LOBBY		
NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
JOHN MONIS	EXECUTIVE DIRECTOR	
NAME OF ORGANIZATION (if applicable)	TELEPHONE	
Hawaii Operating Engineers Industry Stabilization Fund	808-845-6221	
MAILING ADDRESS (Street)	FAX	
1075 OPAKAPAKA STREET		
(City)	(State)	(Zip Code)
KAPOLEI	HI	96707
<i>I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.</i>		
<u><i>John R. Monis</i></u>	<u>2-9-15</u>	
(Signature of Authorizing Officer or Person Represented)	(Date)	