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
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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
Nip	Celeste	Y.K.	(808) 531-4551
MAILING ADDRESS (Street)			FAX (808) 533-4601
222 South Vineyard Street, Suite 401			EMAIL nipfire@hawaii.rr.com
(City)	(State)		(Zip Code)
Honolulu	HI		96813-2453
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Capitol Consultants of Hawaii, LLP.			(808) 531-4551
MAILING ADDRESS (Street)			FAX (808) 533-4601
222 South Vineyard Street, Suite 401			EMAIL nipfire@hawaii.rr.com
(City)	(State)		(Zip Code)
Honolulu	HI		96813-2453

PART II ORGANIZATION

NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
JOCOR Enterprise, LLC		(808) 351-7177
MAILING ADDRESS (Street)		FAX
197 Sand Island Access Rd., #209		EMAIL cory@volcanoecigs.com
(City)	(State)	(Zip Code)
Honolulu	HI	96819
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
Melody Butay Dacanay		(808) 531-4551
MAILING ADDRESS (Street)		FAX
222 South Vineyard Street, Suite 401		EMAIL melody.butay.dacanay@gmail.com
(City)	(State)	(Zip Code)
Honolulu	HI	96813-2453

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PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

☐ Agriculture	☐ Education	☐ Human Services	☐ Science, Technology & Economic Development
☐ Communications & Public Utilities	☐ Government Operation & Finance	☐ Intergovernmental Relations, International Affairs	☐ Tourism & Recreation
☑ Consumer Protection & Commerce	☐ Hawaiian Affairs	☐ Labor & Employment	☐ Transportation
☐ Culture, Arts, Historic Preservation	☑ Health	☐ Planning, Land & Water Use Management	☐ Other: (indicate below)
☐ Ecology, Energy Environmental Protection	☐ Housing	☐ 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) — 2.3.15 (Date)

PART V AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
Cory N. Smith	President

NAME OF ORGANIZATION (if applicable)	TELEPHONE
JOCOR Enterprise, LLC	(808) 351-7177
MAILING ADDRESS (Street)	FAX
197 Sand Island Access Road, #213	EMAIL cory@volcanoecigs.com

(City)	(State)	(Zip Code)
Honolulu	HI	96813

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

(Signature of Authorizing Officer or Person Represented) — 1/23/15 (Date)