



## 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](mailto:ethics@hawaiiethics.org)

Web site: [www.hawaii.gov/ethics](http://www.hawaii.gov/ethics)

THIS SPACE FOR OFFICE USE ONLY

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STATE OF HAWAII  
STATE ETHICS COMMISSION

NOTE: This is a public document.

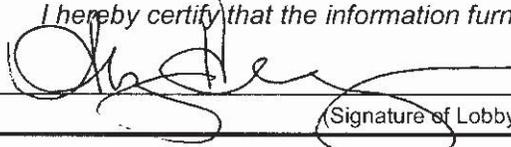
## LOBBYIST REGISTRATION FORM

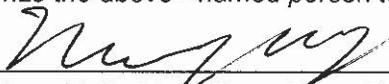
(Type or Print Clearly)

| PART I LOBBYIST   |         |            |  |
|---|---------|------------|--|
| NAME (Last)   | (First) | (Middle)   | TELEPHONE  |
| Hennessey   | Amy     |            | (808) 544-8973   |
| MAILING ADDRESS (Street)  |         |            | FAX  |
| 999 Bishop Street, Suite 1202   |         |            | EMAIL  |
|   |         |            | <a href="mailto:amy@ulupono.com">amy@ulupono.com</a>   |
| (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  |
| Ulupono Initiative  |         |            | (808) 544-8960   |
| MAILING ADDRESS (Street)  |         |            | FAX  |
| 999 Bishop Street, Suite 1202   |         |            | EMAIL  |
|   |         |            | <a href="mailto:info@ulupono.com">info@ulupono.com</a> |
| (City)  | (State) | (Zip Code) |  |
| Honolulu  | HI      | 96813      |  |

| PART II ORGANIZATION   |         |            |  |
|--|---------|------------|--|
| NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)                         |         |            | TELEPHONE  |
| Ulupono Initiative   |         |            | (808) 544-8960   |
| MAILING ADDRESS (Street)   |         |            | FAX  |
| 999 Bishop Street, Suite 1202  |         |            | EMAIL  |
|  |         |            | <a href="mailto:info@ulupono.com">info@ulupono.com</a> |
| (City)   | (State) | (Zip Code) |  |
| Honolulu   | HI      | 96813      |  |
| NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT |         |            | TELEPHONE  |
| Brandon Lee  |         |            | (808) 544-8967   |
| MAILING ADDRESS (Street)   |         |            | FAX  |
| 999 Bishop Street, Suite 1202  |         |            | EMAIL  |
|  |         |            | <a href="mailto:blee@ulupono.com">blee@ulupono.com</a> |
| (City)   | (State) | (Zip Code) |  |
| Honolulu   | HI      | 96813      |  |

| 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 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 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 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>I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.</i> |               |
|                                    | <u>2/2/15</u> |
| (Signature of Lobbyist)   | (Date)        |

| PART V AUTHORIZATION TO LOBBY   |  |            |
|---|--|------------|
| NAME  | TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED |            |
| Murray Clay   | Managing Partner                                   |            |
| NAME OF ORGANIZATION (if applicable)  | TELEPHONE  |            |
| Uluono Initiative   | (808) 544-8960                                     |            |
| MAILING ADDRESS (Street)  | FAX  |            |
| 999 Bishop Street, Suite 1202   | (808) 544-8961                                     |            |
|   | EMAIL  |            |
|   | info@uluono.com                                    |            |
| (City)  | (State)  | (Zip Code) |
| Honolulu  | HI   | 96813      |
| <i>I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.</i> |  |            |
|                                | <u>2/3/2015</u>                                    |            |
| (Signature of Authorizing Officer or Person Represented)  | (Date)   |            |