



HAWAII STATE ETHICS COMMISSION
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STATE OF HAWAII
 STATE ETHICS COMMISSION

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LOBBYIST REGISTRATION FORM

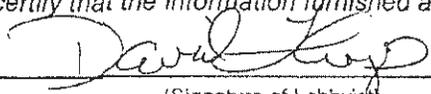
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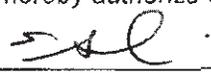
PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Thorp	David		(415) 389-6800
MAILING ADDRESS (Street)			FAX (415) 388-6874
c/o 2350 Kerner Blvd., Ste. 250			EMAIL aba@nmgovlaw.com
(City)	(State)	(Zip Code)	
San Rafael	CA	94901	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business 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
American Beverage Association			(415) 389-6800
MAILING ADDRESS (Street)			FAX (415) 388-6874
c/o 2350 Kerner Blvd., Ste. 250			EMAIL aba@nmgovlaw.com
(City)	(State)	(Zip Code)	
San Rafael	CA	94901	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Elli Abdoli			(415) 389-6800
MAILING ADDRESS (Street)			FAX (415) 388-6874
2350 Kerner Blvd., Ste. 250			EMAIL aba@nmgovlaw.com
(City)	(State)	(Zip Code)	
San Rafael	CA	94901	

REC'D BY email

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 checked="" 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 type="checkbox"/> Labor & Employment	<input type="checkbox"/> Transportation
<input type="checkbox"/> Culture, Arts, Historic Preservation	<input checked="" type="checkbox"/> Health	<input 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>	
 _____ (Signature of Lobbyist)	<u>2/10/15</u> _____ (Date)

PART V AUTHORIZATION TO LOBBY		
NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
Elli Abdoli	Designated Agent for Filer	
NAME OF ORGANIZATION (if applicable)	TELEPHONE	
Nielsen Merksamer Parinello Gross & Leoni, LLP	(415) 389-6800	
MAILING ADDRESS (Street)	FAX (415) 388-6874	
2350 Kerner Blvd., Ste. 250	EMAIL aba@nrmgovlaw.com	
(City)	(State)	(Zip Code)
San Rafael	CA	94901
<i>I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.</i>		
 _____ (Signature of Authorizing Officer or Person Represented)	<u>2-13-15</u> _____ (Date)	