



**HAWAII STATE ETHICS COMMISSION**

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or P.O. BOX 616, HONOLULU, HAWAII 96809  
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**LOBBYIST REGISTRATION FORM**

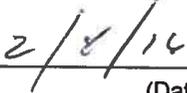
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STATE OF HAWAII  
STATE ETHICS COMMISSION

<b>PART I LOBBYIST</b>			
NAME (Last)	(First)	(Middle)	TELEPHONE
Lum	Lori		(808) 544-8300
MAILING ADDRESS (Street)			FAX (808) 544-8399
999 Bishop Street, 23rd Floor			EMAIL llum@wik.com
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96813	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Watanabe Ing LLP			(808) 544-8300
MAILING ADDRESS (Street)			FAX (808) 544-8399
999 Bishop Street, 23rd Floor			EMAIL llum@wik.com
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96813	

<b>PART II ORGANIZATION</b>			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
The Howard Hughes Corporation			(808) 591-8411
MAILING ADDRESS (Street)			FAX (808) 792-3552
1240 Ala Moana Boulevard, Suite 200			EMAIL david.striph@howardhughes.com
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96814	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
David M. Striph			(808) 591-8411
MAILING ADDRESS (Street)			FAX (808) 792-3552
1240 Ala Moana Boulevard, Suite 200			EMAIL david.striph@howardhughes.com
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96814	

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 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 type="checkbox"/> Ecology, Energy Environmental Protection	<input checked="" 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)	 _____ (Date)

PART V AUTHORIZATION TO LOBBY		
NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
David M. Striph	Executive Vice President	
NAME OF ORGANIZATION (if applicable)	TELEPHONE	
The Howard Hughes Corporation	(808) 591-8411	
MAILING ADDRESS (Street)	FAX (808) 792-3552	
	EMAIL david.striph@howardhughes.com	
(City)	(State)	(Zip Code)
Honolulu	Hawaii	96814
<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)		 _____ (Date)