



HAWAII STATE ETHICS COMMISSION
 1001 BISHOP STREET, HONOLULU, HAWAII 96813
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 STATE OF HAWAII
 STATE ETHICS COMMISSION

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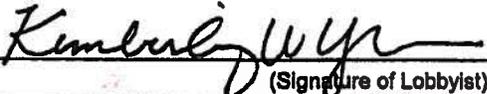
LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Yoshimoto	Kimberley	W	521-9500
MAILING ADDRESS (Street)			FAX 541-9050
745 Fort Street, Suite 1700			EMAIL kyoshimoto@imanaka-asato.com
(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
Imanaka Asato LLLC			521-9500
MAILING ADDRESS (Street)			FAX 541-9050
745 Fort Street, Suite 1700			EMAIL kyoshimoto@imanaka-asato.com
(City)	(State)	(Zip Code)	
Honolulu	HI	96813	

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Hawaii Human Resources, Inc. (HIHR)			695-2222
MAILING ADDRESS (Street)			FAX 695-2353
Topa Financial Center, PH, 745 Fort Street			EMAIL kmorse@hihrhawaii.com
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96813	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Wayne Tomita Chief Financial Officer			808-695-2222
MAILING ADDRESS (Street)			FAX 808-695-2353
745 Fort Street, PH			EMAIL wtomita@hihrhawaii.com
(City)	(State)	(Zip Code)	
Honolulu	HI	96813	

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 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 type="checkbox"/> Planning, Land & Water Use Management	<input type="checkbox"/> Other: (Indicate below)
<input 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>2/23/16</u> (Date)

PART V AUTHORIZATION TO LOBBY	
NAME Kalani A. Morse	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED Corporate Counsel & Vice President of Human Resources
NAME OF ORGANIZATION (if applicable) Hawaii Human Resources, Inc. (dba HIHR)	TELEPHONE 808-695-2222
MAILING ADDRESS (Street) 745 Fort Street, PH	FAX 808-690-9335
	EMAIL kmorse@hihrhawaii.com
(City) Honolulu	(State) HI
	(Zip Code) 96813
<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>23 Feb 2016</u> (Date)