

**PARTI** 

NAME (Last)

## MAVVAILSTATE ETHICS CUIVIIVIISSICIN

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

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(First)

NOTE: This is a public document.

**LOBBYIST** 

LOBBYIST REGISTRATION FORM 13 A10:46

(Middle)

STATE OF HAWAII

(Type or Print Clearly)

JABULA - CAT	LOUIS KHARA JANE	808 264 2096
MAILING ADDRESS (Street)		FAX
P.O. BOX 2	313	EMAIL Kharaj D strategies 360
(City)	(State)	(Zip Code)
Honolulu	41	96804
EMPLOYING ORGANIZATION (Fill in or	lly 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 LE	TELEPHONE	
	808 328 8339	
Strategies 300 MAILING ADDRESS (Street)		FAX
P. O. Box 2313		EMAIL
(City)	(State)	(Zip Code)
	(State)	
Honolulu	41	96804
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE <sup>,</sup>
John White		808 298 8339
MAILING ADDRESS (Street)	FAX	
80 Box	2313	EMAIL
(City)	(State)	(Zip Code)
Honolulu	HI	90804

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY				
Agriculture	Education	Muman Services	Science, Technology & Economic Development	
Communications & Public Utilities	Government Operation & Finance	<ul><li>Intergovernmental Relations, International Affairs</li></ul>	Tourism & Recreation	
Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employment	☐ Transportation	
Culture, Arts, Historic Preservation	W Health	<ul><li>Planning, Land &amp; Water Use Management</li></ul>	Other: (indicate below)	
Ecology, Energy Environmental Protection	Housing	Public Safety & Corrections		
		<u></u>		
PART IV CERTIFICATION				
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.				
Kharo oile (Car			2-1-2017	
(Signature of Lobbyist)			(Date)	
PART V AUTHORIZATION TO LOBBY				
NAME TITLE OF AUTHORIZING OFFICER OR PERSON REPR		ER OR PERSON REPRESENTED		
JOHN WHITE		SENIOR VICE	SENIOR VICE PRESIDENT	
NAME OF ORGANIZATION (if applicable)			TELEPHONE	
Strategies	360		808 228 8339	
MAILING ADDRESS (Street)		FAX		
P.O. Box 2313	3		EMAIL	
(City)	(State)		(Zip Code)	
Honolula	411	(	96804	
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.				
	UH	·	02-01-2017	
(Signature of Authorizing Officer or Person Represented)			(Date)	