



HAWAII STATE ETHICS COMMISSION
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NOTE: This is a public document.

LOBBYIST REGISTRATION FORM STATE OF HAWAII ETHICS COMMISSION
(Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Kaneko	William	M.	808-524-1800
MAILING ADDRESS (Street)			FAX
1001 Bishop Street, Suite 1800			808-524-4591
			EMAIL
			william.kaneko@dentons.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
Dentons US LLP			808-524-1800
MAILING ADDRESS (Street)			FAX
1001 Bishop Street, Suite 1800			808-524-4591
			EMAIL
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96813	


PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
Expedia Group		
MAILING ADDRESS (Street)		FAX
333 108th Avenue NE		
		EMAIL
(City)	(State)	(Zip Code)
Bellevue	Washington	98004
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
Amber Knott		512-505-1545
MAILING ADDRESS (Street)		FAX
1011 W. Fifth Street, Suite 300		
		EMAIL
		aknott@expedia.com
(City)	(State)	(Zip Code)
Austin	Texas	78703

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 checked="" 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 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 hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.



1/10/19

 (Signature of Lobbyist) (Date)

PART V AUTHORIZATION TO LOBBY

NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
Amber Knott		Director, State & Local Government Affairs	
NAME OF ORGANIZATION (if applicable)		TELEPHONE	
Expedia Group		512-505-1545	
MAILING ADDRESS (Street)		FAX	
1011 W. Fifth Street, Suite 300		EMAIL	
		aknott@expedia.com	
(City)	(State)	(Zip Code)	
Austin	Texas	78703	

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.


1/9/19

 (Signature of Authorizing Officer or Person Represented) (Date)