



## HAWAII STATE ETHICS COMMISSION

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
Web site: www.hawaii.gov/ethics

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STATE OF HAVAIL INCISSIMMOD COINTS STATE

## LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Harris	Robert	,	808-220-4306
MAILING ADDRESS (Street)			FAX
677 Ala Moana Blvd, Suite 705	5		EMAIL robert.harris@sunrunhome.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
N/A			
MAILING ADDRESS (Street)			FAX
			EMAIL
(City)	(State)		(Zip Code)

PART II ORGANIZATION	****	
NAME OF ORGANIZATION YOU LO	TELEPHONE 415-580-6856 FAX	
The Alliance for Solar Choi		
MAILING ADDRESS (Street) 595 Market Street, Floor 29		
		EMAIL compliance@allianceforsolarchoice.com
(City)	(State)	(Zip Code)
San Francisco	CA	94105
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
Deanna Hayes, The Crosby	y Ottenhoff Group	
MAILING ADDRESS (Street)		FAX
611 Pennsylvania Ave SE #267		EMAIL deanna@grandsiamfinance.com
(City)	(State)	(Zip Code)
Washington	DC	20003

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PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY						
Agriculture	☐ Education	☐ Human Services	Science, Technology & Economic Development			
Communications & Public Utilities	Government Operation & Finance	Intergovernmental Relations, International Affairs	☐ Tourism & Recreation			
Consumer Protection & Commerce	Hawaiian Affairs	☐ Labor & Employment	Transportation			
Culture, Arts, Historic Preservation	☐ Health	<ul><li>Planning, Land &amp; Water</li><li>Use Management</li></ul>	Other: (indicate below)			
Ecology, Energy Environmental Protection	Housing	☐ Public Safety & Corrections	Solar Energy			
PART IV CERTIFICATION	ON OF LOBBYIST					
<del> </del>		re is, to the best of my knowle	dge, correct and complete.			
Che the			1/28/19			
(Signature of Lobbyist) (Date)						
p						
PART V AUTHORIZAT	ION TO LOBBY					
NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED					
Erica Joy	Senior Financial & Operations					
NAME OF ORGANIZATION (if applicable)			TELEPHONE			
The Alliance for Solar Choice (TASC)			415-580-6855			
MAILING ADDRESS (Street)			FAX			
595 Market Street, Floor 29			EMAIL ompliance@allianceforsolarchoice.com			
(City)	(State)		(Zip Code)			
San Francisco	CA		94105			
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.						
Erica) de	Ha	1/2	elia			
(Signature of Authorizing Officer or Person Represented)		sented)	(Date)			