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LOBBYIST REGISTRATION STATEMENT

You must file this statement with the Office of the County Clerk if you are an individual who for pay or other consideration engages in lobbying on behalf of another person, or organization, for the than \$750 lobbying during any reporting period (January 14 through December 31st of the previous year). NOTE THAT THIS IS A PUBLIC DOCUMENT.

	(Tana on Dring	Clamba)			
NAME Last Yamaki, Tina		(Type or Print Clearly) First			
BUSINESS MAILING ADDRESS	Street	City	State	Zip Code	
3610 Waialae Ave, Honolulu, I	·II 96816				
TELEPHONE NO. (808) 592-4200	E-MAIL tyamaki@rmh	E-MAIL tyamaki@rmhawaii.org			
NAME OF PERSON OR ORGANIZ Retail Merchants of Hawaii	ATION YOU LOBBY I	OR (do not al	breviate)		
BUSINESS MAILING ADDRESS 3610 Waialae Ave., Honolulu,	Street HI 96816	City	State	Zip Code	
BUSINESS TELEPHONE NO.					
	SUBJECT AREAS				
	lution Number(s), Agen				
Public Infrastructure, Sustainability, Tiourism, Z	oning, Public Safety, Technolo	ogy, Transportation	n, Tourism, Business &	& Economic Develpment	
Bill 102					
	CERTIFICATION	OF LOBBYIS	T		
I hereby certify that the information				ct and complete.	
myan		Decemb	December 31, 2023		
(Signature of Lobbyist)		(Date)			

	AUTHO	RIZATION	TO LOBE	BY		
NAME Darcy Lindamood		TITLE OF AUTHORIZING OFFICER OF PERSON REPRESENTED Chairperson of the Retail Merchants of Hawaii Board of Directors				
NAME OF ORGANIZATION (if applicable) Retail Merchants of Hawaii				TELEPHONE NO. (808) 486-6331		
ADDRESS OF ORGANIZATION 99-969 Iwaena Street, Alea, HI 96		Street	City	State	Zip Code	
I hereby authorize the above-named person	n to engage in lobby	ying activities	on behalf of th	e undersigned.		
		December 31, 2023				
(Signature of Authorizing Officer)		(Date)				