



# HAWAIIAN HOME LANDS TRUST

Department of Hawaiian Home Lands

## Proposed Legislative Action Request for 2018

Name: \_\_\_\_\_

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Lessee: Y / N

Applicant: Y / N

Beneficiary: Y / N

Issue: \_\_\_\_\_

Bill: Y / N

Resolution: Y / N

Other: Y / N

Statement explaining why you need the legislative action and what problem the legislative action is designed to correct?

Does your proposal require an amendment to the HHCA? Y / N

Does your proposal require funding? Y / N

If yes, how much funding? \_\_\_\_\_