

**HAWAII STATE ETHICS COMMISSION**

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 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

THIS SPACE FOR OFFICE USE ONLY

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STATE OF HAWAII
STATE ETHICS COMMISSION

NOTE: This is a public document.

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Wagner	Anthony		202-722-3888
MAILING ADDRESS (Street)			FAX
1640 Rhode Island Avenue, NW			EMAIL
			tony.wagner@hrc.org
(City)	(State)	(Zip Code)	
Washington	DC	20036	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
MAILING ADDRESS (Street)			FAX
			EMAIL
(City)	(State)	(Zip Code)	

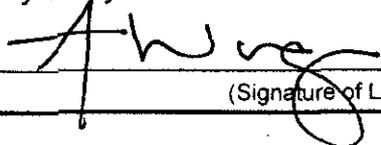
PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Human Rights Campaign			202-628-4160
MAILING ADDRESS (Street)			FAX
1640 Rhode Island Avenue, NW			EMAIL
			legal@hrc.org
(City)	(State)	(Zip Code)	
Washington	DC	20036	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Darrin Hurwitz			202-572-8914
MAILING ADDRESS (Street)			FAX
1640 Rhode Island Avenue, NW			EMAIL
			darrin.hurwitz@hrc.org
(City)	(State)	(Zip Code)	
Washington	DC	20036	

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 type="checkbox"/> Tourism & Recreation |
| <input 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 checked="" 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.

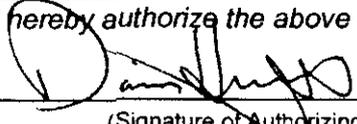


(Signature of Lobbyist)

1/12/13

(Date)

PART V AUTHORIZATION TO LOBBY

NAME Darrin Hurwitz		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED Assistant General Counsel	
NAME OF ORGANIZATION (if applicable) Human Rights Campaign		TELEPHONE 202-572-8914	
MAILING ADDRESS (Street) 1640 Rhode Island Avenue, NW		FAX	
(City) Washington		EMAIL darrin.hurwitz@hrc.org	
(State) DC		(Zip Code) 20036	
<i>I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.</i>			
		1/10/13	
(Signature of Authorizing Officer or Person Represented)		(Date)	