



HAWAII STATE ETHICS COMMISSION
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 Web site: www.hawaii.gov/ethics

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NOTE: This is a public document.

STATE OF HAWAII
 STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Slovin	Gary	M	539-0834
MAILING ADDRESS (Street)			FAX 533-4945
1099 Alakea Street, Suite 1400			EMAIL
			gslovin@awlaw.com
(City)	(State)	(Zip Code)	
Honolulu	HI	96813	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Slovin & Ito, LLP			539-0400
MAILING ADDRESS (Street)			FAX 533-4945
1099 Alakea Street, Suite 1400			EMAIL
(City)	(State)	(Zip Code)	
Honolulu	HI	96813	

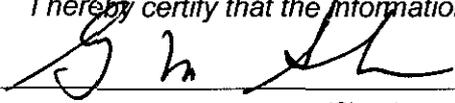
PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Consumer Data Industry Association			202-408-7407
MAILING ADDRESS (Street)			FAX 202-371-0134
1090 Vermont Ave, N.W., Suite 200			EMAIL
(City)	(State)	(Zip Code)	
Washington DC		20005	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Eric Ellman			202-408-7407
MAILING ADDRESS (Street)			FAX 202-371-0134
1090 Vermont Ave, N.W., Suite 200			EMAIL
			eellman@cdiaonline.org
(City)	(State)	(Zip Code)	
Washington DC		20005	

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 checked="" 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 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	_____

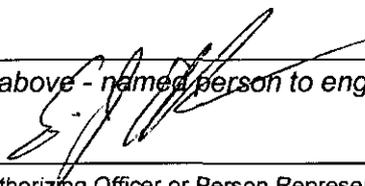
PART IV CERTIFICATION OF LOBBYIST

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

 _____ 1/18/2013

(Signature of Lobbyist) (Date)

PART V AUTHORIZATION TO LOBBY

NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
Eric Ellman			
NAME OF ORGANIZATION (if applicable)		TELEPHONE	
Consumer Data Industry Association		202-408-7407	
MAILING ADDRESS (Street)		FAX 202-371-0134	
1090 Vermont Ave, N.W., Suite 200		EMAIL	
		eellman@cdiaonline.org	
(City)	(State)	(Zip Code)	
Washington DC		20005	
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.			
 _____		<u>1/14/2013</u>	
(Signature of Authorizing Officer or Person Represented)		(Date)	