

**HAWAII STATE ETHICS COMMISSION**

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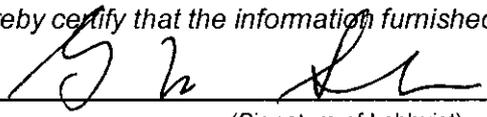
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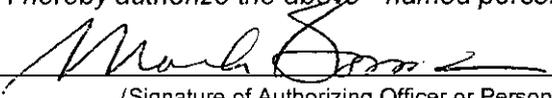
LOBBYIST REGISTRATION FORM STATE OF HAWAII
 (Type or Print Clearly) STATE ETHICS COMMISSION

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
Distilled Spirits Council of the United States			202-628-3544
MAILING ADDRESS (Street)			FAX 202-682-8888
1250 Eye Street N.W., Suite 400			EMAIL
(City)	(State)	(Zip Code)	
Washington, D.C.		20005	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Mark Gorman			202-628-3544
MAILING ADDRESS (Street)			FAX 202-682-8888
1250 Eye Street N.W., Suite 400			EMAIL
			mgorman@discus.org
(City)	(State)	(Zip Code)	
Washington, D.C.		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 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 checked="" type="checkbox"/> Ecology, Energy Environmental Protection	<input type="checkbox"/> Housing	<input type="checkbox"/> Public Safety & Corrections	_____

PART IV CERTIFICATION OF LOBBYIST	
<i>I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.</i>	
	1/18/2013
(Signature of Lobbyist)	(Date)

PART V AUTHORIZATION TO LOBBY	
NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
Mark Gorman	
NAME OF ORGANIZATION (if applicable)	TELEPHONE
Distilled Spirits Council of the United States	202-628-3544
MAILING ADDRESS (Street)	FAX 202-682-8888
1250 Eye Street N.W., Suite 400	EMAIL mgorman@discus.org
(City)	(State)
Washington, D.C.	(Zip Code)
	20005
<i>I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.</i>	
	1-16-13
(Signature of Authorizing Officer or Person Represented)	(Date)