



EMAIL

HAWAII STATE ETHICS COMMISSION

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 or P.O. BOX 616, HONOLULU, HAWAII 96809
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 email: ethics@hawaiiethics.org
 Web site: www.hawaii.gov/ethics

THIS SPACE FOR OFFICE USE ONLY

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NOTE: This is a public document.

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

STATE OF HAWAII
STATE ETHICS COMMISSION

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Finnegan	Gaudencia	Lynn	808-741-5966
MAILING ADDRESS (Street)			FAX
PO Box 3017			EMAIL lynn@hawaiicharterschools.com
(City)	(State)	(Zip Code)	
Aiea	HI	96701	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Hawaii Public Charter Schools Network			808-380-6403
MAILING ADDRESS (Street)			FAX
PO Box 3017			EMAIL info@hawaiicharterschools.com
(City)	(State)	(Zip Code)	
Aiea	HI	96701	

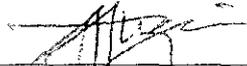
PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Hawaii Public Charter Schools Network			808-380-6403
MAILING ADDRESS (Street)			FAX
PO Box 3017			EMAIL info@hawaiicharterschools.com
(City)	(State)	(Zip Code)	
Aiea	HI	96701	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Gaudencia Lynn Finnegan			808-380-6403
MAILING ADDRESS (Street)			FAX
PO Box 3017			EMAIL lynn@hawaiicharterschools.com
(City)	(State)	(Zip Code)	
Aiea	HI	96701	

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

<input type="checkbox"/> Agriculture	<input checked="" 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 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)

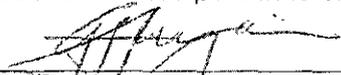
1/31/2013

 (Date)

PART V AUTHORIZATION TO LOBBY

NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
Gaudencia Lynn Finnegan		Executive Director	
NAME OF ORGANIZATION (if applicable)		TELEPHONE	
Hawaii Public Charter Schools Network		808-380-6403	
MAILING ADDRESS (Street)		FAX	
PO Box 3017		EMAIL	
		lynn@hawaiiarterschools.com	
(City)	(State)	(Zip Code)	
Aiea	HI	96701	

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.



 (Signature of Authorizing Officer or Person Represented)

1/31/2013

 (Date)