



## HAWAII STATE ETHICS COMMISSION

1001 BISHOP STREET, HONOLULU, HAWAII 96813

or P.O. BOX 616, HONOLULU, HAWAII 96809

TEL: (808) 587-0460 FAX: (808) 587-0470

email: [ethics@hawaiiethics.org](mailto:ethics@hawaiiethics.org)

Web site: [www.hawaii.gov/ethics](http://www.hawaii.gov/ethics)

THIS SPACE FOR OFFICE USE ONLY

NOTE: This is a public document.

## LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

'13 FEB 15 AM 11:45  
**ORIGINAL**

PART I LOBBYIST			STATE OF HAWAII STATE ETHICS COMMISSION
NAME (Last)	(First)	(Middle)	TELEPHONE
Finnegan	Gaudencia	Lynn	808-741-5966
MAILING ADDRESS (Street)			FAX
PO Box 3017			EMAIL <a href="mailto:lynn@hawaiiarterschools.com">lynn@hawaiiarterschools.com</a>
(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 <a href="mailto:info@hawaiiarterschools.com">info@hawaiiarterschools.com</a>
(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 <a href="mailto:info@hawaiiarterschools.com">info@hawaiiarterschools.com</a>
(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 <a href="mailto:lynn@hawaiiarterschools.com">lynn@hawaiiarterschools.com</a>
(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

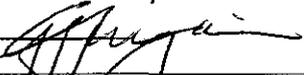
NAME OF ORGANIZATION (if applicable)	TELEPHONE
Hawaii Public Charter Schools Network	808-380-6403

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)