

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
Web site: www.hawaii.gov/ethics

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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
Chin	Douglas	S.	(808) 523-2500
MAILING ADDRESS (Street)			FAX (808) 523-0842
ASB Tower, Suite 2200, 1001 Bishop Street			EMAIL
			dchin@carlsmith.com
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96813	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Carlsmith Ball LLP			(808) 523-2500
MAILING ADDRESS (Street)			FAX (808) 523-0842
ASB Tower, Suite 2200, 1001 Bishop Street			EMAIL
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96813	

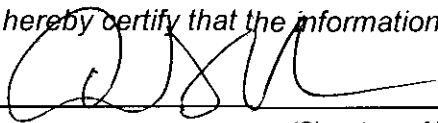
PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Corrections Corporation of America			
MAILING ADDRESS (Street)			FAX
10 Burton Hills Boulevard			EMAIL
(City)	(State)	(Zip Code)	
Nashville	Tennessee	37215	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Brad Regens			
MAILING ADDRESS (Street)			FAX
10 Burton Hills Boulevard			EMAIL
(City)	(State)	(Zip Code)	
Nashville	Tennessee	37215	

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 type="checkbox"/> Other: (indicate below)
<input type="checkbox"/> Ecology, Energy Environmental Protection	<input type="checkbox"/> Housing	<input checked="" 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.



8/3/13

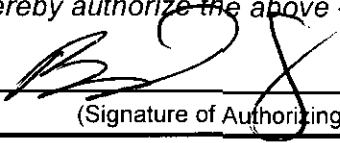
(Signature of Lobbyist)

(Date)

PART V AUTHORIZATION TO LOBBY

NAME Brad Regens		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED Vice President, State Partnership Relations	
NAME OF ORGANIZATION (if applicable) Corrections Corporation of America		TELEPHONE	
MAILING ADDRESS (Street) 10 Burton Hills Boulevard		FAX	EMAIL
(City) Nashville	(State) Tennessee	(Zip Code) 37215	

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



8/19/13

(Signature of Authorizing Officer or Person Represented)

(Date)