



HAWAII STATE ETHICS COMMISSION

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STATE OF HAWAII
STATE ETHICS COMMISSION

NOTE: This is a public document.

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Barrett	Michael		202-628-4160
MAILING ADDRESS (Street)			FAX 202-628-0517
1640 Rhode Island Ave NW			EMAIL
(City)	(State)	(Zip Code)	
Washington	DC	20036	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
MAILING ADDRESS (Street)			FAX
			EMAIL
(City)	(State)	(Zip Code)	

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Human Rights Campaign			202-628-4160
MAILING ADDRESS (Street)			FAX 202-628-0517
1640 Rhode Island Ave NW			EMAIL
(City)	(State)	(Zip Code)	
Washington	DC	20036	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Darrin Hurwitz			202-672-8914
MAILING ADDRESS (Street)			FAX 202-628-0517
1640 Rhode Island Ave NW			EMAIL
(City)	(State)	(Zip Code)	
Washington	DC	20036	

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 checked="" type="checkbox"/> Other: (indicate below)
LGBT Civil Rights |
| <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.

[Handwritten Signature]

2/11/2014

(Signature of Lobbyist)

Effective date: 9/28/2013

(Date)

PART V AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
Darrin Hurwitz	Assistant Corporate Secretary

NAME OF ORGANIZATION (if applicable)	TELEPHONE
Human Rights Campaign	202-572-8914

MAILING ADDRESS (Street)	FAX
1640 Rhode Island Ave NW	202-628-0517
	EMAIL

(City)	(State)	(Zip Code)
Washington	DC	20036

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

[Handwritten Signature]

2/11/2014

(Signature of Authorizing Officer or Person Represented)

(Date)