



HAWAII STATE ETHICS COMMISSION
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STATE OF HAWAII
 STATE ETHICS COMMISSION

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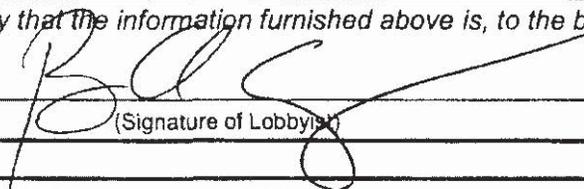
LOBBYIST REGISTRATION FORM

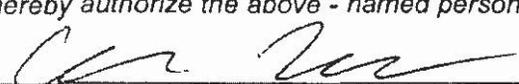
(Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Coppa	Bruce		(808) 531-4551
MAILING ADDRESS (Street)			FAX (808) 533-4601
222 South Vineyard Street, Suite 401			EMAIL brucopp@gmail.com
(City)	(State)	(Zip Code)	
Honolulu	HI	96813-2453	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Capitol Consultants of Hawaii, LLP			(808) 531-4551
MAILING ADDRESS (Street)			FAX (808) 533-4601
222 South Vineyard Street, Suite 401			EMAIL brucopp@gmail.com
(City)	(State)	(Zip Code)	
Honolulu	HI	96813-2453	

PART II ORGANIZATION	
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)	TELEPHONE
FanDuel, Inc.	202-470-5134
MAILING ADDRESS (Street)	FAX
19 Union Sq W, 9th Floor	EMAIL cory fox@fanduel.com
(City)	(State)
New York, NY 10003	(Zip Code)
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT	TELEPHONE
Karen Blackistone	202-417-3525
MAILING ADDRESS (Street)	FAX
1155 F Street NW Suite 1050	EMAIL kblackistone@goberhilgers.com
(City)	(State)
Washington, DC 20004	(Zip Code)

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 checked="" 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)
<input type="checkbox"/> Ecology, Energy Environmental Protection	<input type="checkbox"/> Housing	<input type="checkbox"/> Public Safety & Corrections	regulation of fantasy sports

PART IV CERTIFICATION OF LOBBYIST	
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.	
	11/24/15
(Signature of Lobbyist)	(Date)

PART V AUTHORIZATION TO LOBBY	
NAME Cory Fox	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED Counsel, Policy and Government Affairs
NAME OF ORGANIZATION (if applicable) FanDuel, Inc.	TELEPHONE 202-470-5134
MAILING ADDRESS (Street) 19 Union Sq W 9th Floor	FAX
(City) New York, NY 10003	EMAIL cory.fox@fanduel.com
(State)	(Zip Code)
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.	
	12/2/15
(Signature of Authorizing Officer or Person Represented)	(Date)