



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
Burgoyne	Mirielle		202-552-2000
MAILING ADDRESS (Street)			FAX
901 E Street NW			EMAIL
			pewlobbyingcompliance@pewtrusts.org
(City)	(State)	(Zip Code)	
Washington	DC	20004	
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
The Pew Charitable Trusts			202-552-2000
MAILING ADDRESS (Street)			FAX
901 E Street NW			EMAIL
			pewlobbyingcompliance@pewtrusts.org
(City)	(State)	(Zip Code)	
Washington	DC	20004	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Alan Cohn			202-552-2000
MAILING ADDRESS (Street)			FAX
901 E Street NW			EMAIL
			pewlobbyingcompliance@pewtrusts.org
(City)	(State)	(Zip Code)	
Washington	DC	20004	

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 checked="" 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.

Maureen Bruggeman

4/5/2016

(Signature of Lobbyist)

(Date)

PART V AUTHORIZATION TO LOBBY

NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
Tamera Luzzatto		Senior Vice President, Government Relations	
NAME OF ORGANIZATION (if applicable)		TELEPHONE	
The Pew Charitable Trusts		202-552-2000	
MAILING ADDRESS (Street)		FAX	
901 E Street NW		EMAIL	
		pewlobbyingcompliance@pewtrusts.org	
(City)	(State)	(Zip Code)	
Washington	DC	20004	

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

Tamera Luzzatto

4/5/16

(Signature of Authorizing Officer or Person Represented)

(Date)