



HAWAII STATE ETHICS COMMISSION
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 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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STATE OF HAWAII
 STATE ETHICS COMMISSION

NOTE: This is a public document.

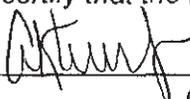
LOBBYIST REGISTRATION FORM

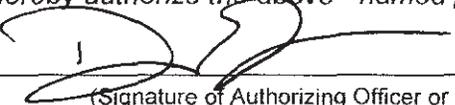
(Type or Print Clearly)

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Klump	Amanda	J	916-583-9300
MAILING ADDRESS (Street)			FAX 916-583-9331
1415 L Street, Suite 1150			EMAIL Amanda.Klump@ALTRIA.COM
(City)	(State)	(Zip Code)	
Sacramento	CA	95814	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
N/A			
MAILING ADDRESS (Street)			FAX
N/A			EMAIL
(City)	(State)	(Zip Code)	
N/A			

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Altria Client Services Inc. and its Affiliates—Philip Morris USA Inc., John Middleton Co., U.S. Smokeless Tobacco Co., and Nu Mark LLC			916-583-9300
MAILING ADDRESS (Street)			FAX 916-583-9331
1415 L Street, Suite 1150			EMAIL Amanda.Klump@ALTRIA.COM
(City)	(State)	(Zip Code)	
Sacramento	CA	95814	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Amanda J. Klump			916-5 83-9300
MAILING ADDRESS (Street)			FAX 916-583-9331
1415 L Street, Suite 1150			EMAIL Amanda.Klump@ALTRIA.COM
(City)	(State)	(Zip Code)	
Sacramento	CA	95814	

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 checked="" type="checkbox"/> Intergovernmental Relations, International Affairs	<input checked="" type="checkbox"/> Tourism & Recreation
<input checked="" type="checkbox"/> Consumer Protection & Commerce	<input type="checkbox"/> Hawaiian Affairs	<input checked="" type="checkbox"/> Labor & Employment	<input type="checkbox"/> Transportation
<input type="checkbox"/> Culture, Arts, Historic Preservation	<input checked="" type="checkbox"/> Health	<input type="checkbox"/> Planning, Land & Water Use Management	<input checked="" type="checkbox"/> Other: (indicate below) <u>Tobacco</u>
<input type="checkbox"/> Ecology, Energy Environmental Protection	<input type="checkbox"/> Housing	<input type="checkbox"/> Public Safety & Corrections	

PART IV CERTIFICATION OF LOBBYIST	
<i>I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.</i>	
 _____ (Signature of Lobbyist)	<u>1/8/15</u> _____ (Date)

PART V AUTHORIZATION TO LOBBY		
NAME Dan Smith	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED Regional Director, State Government Affairs	
NAME OF ORGANIZATION (if applicable) Altria Client Services, Inc and its Affiliates	TELEPHONE 916-583-9300	
MAILING ADDRESS (Street) 1415 L Street, Suite 1150	FAX 916-583-9331	
	EMAIL dan.smith@altria.com	
(City) Sacramento	(State) CA	(Zip Code) 95814
<i>I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.</i>		
 _____ (Signature of Authorizing Officer or Person Represented)		<u>1-9-2015</u> _____ (Date)