



**HAWAII STATE ETHICS COMMISSION**  
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STATE OF HAWAII  
 STATE ETHICS COMMISSION

NOTE: This is a public document.

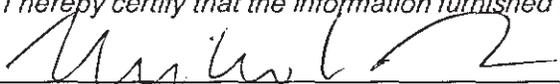
**LOBBYIST REGISTRATION FORM**

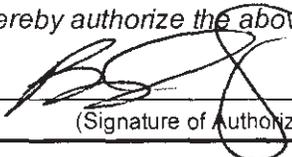
(Type or Print Clearly)

<b>PART I LOBBYIST</b>			
NAME (Last)	(First)	(Middle)	TELEPHONE
Ito	Mihoko	E.	539-0400
MAILING ADDRESS (Street)			FAX 533-4945
First Hawaiian Center, 999 Bishop Street, Suite 1400			EMAIL
			mito@awlaw.com
(City)	(State)	(Zip Code)	
Honolulu	HI	96813	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Ashford & Wriston LLP			539-0400
MAILING ADDRESS (Street)			FAX 533-4945
First Hawaiian Center, 999 Bishop Street, Suite 1400			EMAIL
(City)	(State)	(Zip Code)	
Honolulu	HI	96813	

<b>PART II ORGANIZATION</b>			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Corrections Corporation of America			(615) 263-3000
MAILING ADDRESS (Street)			FAX (615) 263-3140
10 Burton Hills Boulevard			EMAIL
(City)	(State)	(Zip Code)	
Nashville	TN	37215	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Brad Regens			615-263-6798
MAILING ADDRESS (Street)			FAX 615-263-3100
10 Burton Hills Boulevard			EMAIL
			brad.regens@correctionscorp.com
(City)	(State)	(Zip Code)	
Nashville	TN	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>I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.</i>	
	<u>1/21/2015</u>
(Signature of Lobbyist)	(Date)

PART V AUTHORIZATION TO LOBBY			
NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
Brad Regens		Vice President, State Partnership Relations	
NAME OF ORGANIZATION (if applicable)		TELEPHONE	
Corrections Corporation of America		615-263-6798	
MAILING ADDRESS (Street)		FAX 615-263-3100	
10 Burton Hills Boulevard		EMAIL	
		brad.regens@correctionscorp.com	
(City)	(State)	(Zip Code)	
Nashville	TN	37215	
<i>I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.</i>			
		<u>1/16/2015</u>	
(Signature of Authorizing Officer or Person Represented)		(Date)	