HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, HONOLULU, HAWAII 96813
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
Durham	Kelly		(615) 263-3000
MAILING ADDRESS (Street)			FAX
10 Burton Hills Blvd			EMAIL Kelly.Durham@cca.com
(City)	(State)		(Zip Code)
Nashville	TN		37215
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
Corrections Corporation of America		615-263-3000
MAILING ADDRESS (Street)		FAX
10 Burton Hills Blvd		EMAIL
(City)	(State)	(Zip Code)
Nashville	TN	37215
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
Jamie Warren		615-263-3056
MAILING ADDRESS (Street)		FAX 615-565-9906
10 Burton Hills Blvd		EMAIL jamie.warren@cca.com
(City)	(State)	(Zip Code)
Nashville	TN	37215

REC'D BY email

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

☐ Agriculture	☐ Education	☐ Human Services	☐ Science, Technology & Economic Development
☐ Communications & Public Utilities	☐ Government Operation & Finance	☐ Intergovernmental Relations, International Affairs	☐ Tourism & Recreation
☐ Consumer Protection & Commerce	☐ Hawaiian Affairs	☐ Labor & Employment	☐ Transportation
☐ Culture, Arts, Historic Preservation	☐ Health	☐ Planning, Land & Water Use Management	☐ Other: (Indicate below)
☐ Ecology, Energy Environmental Protection	☐ Housing	☑ 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.

(Signature of Lobbyist) 2/3/15 (Date)

PART V AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
Tony Grande	Chief Development Officer

NAME OF ORGANIZATION (If applicable)	TELEPHONE
Corrections Corporation of America	615-263-3000
MAILING ADDRESS (Street)	FAX
10 Burton Hills Blvd	EMAIL Tony.grande@correctionscorp.com

(City)	(State)	(Zip Code)
Nashville	TN	37215

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

(Signature of Authorizing Officer or Person Represented) 2-3-15 (Date)