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CKD

HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, ASB TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: 587-0460 FAX: 587-0470
email: ethics@hawaiiethics.org

THIS SPACE FOR OFFICE USE ONLY

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STATE OF HAWAII
STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST

NAME (Last)	(First)	(Middle)	TELEPHONE
PILTZ	Karen	M.L.	808-528-8200
MAILING ADDRESS (Street)			FAX
745 Fort Street, 9th Floor			808-536-5869
(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
Chun Kerr Dodd Beaman & Wong LLLP			808-528-8200
MAILING ADDRESS (Street)			FAX
745 Fort Street, 9th Floor			808-536-5869
(City)	(State)	(Zip Code)	
Honolulu	HI	96813	

PART II ORGANIZATION

NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Advantage Capital Partners			504-522-4850
MAILING ADDRESS (Street)			FAX
909 Poydras St., #2230			504-522-4950
(City)	(State)	(Zip Code)	
New Orleans	LA	70112	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Michelle Smith			314-725-0800
MAILING ADDRESS (Street)			FAX
7733 Forsyth Blvd., Suite 1850			314-725-4265
(City)	(State)	(Zip Code)	
St. Louis	MO	63105	

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

- [ ] Agriculture
- [ ] Education
- [ ] Human Services
- [x] Science, Technology & Economic Development
- [x] Communications & Public Utilities
- [x] Government Operation & Finance
- [x] Intergovernmental Relations, International Affairs
- [ ] Tourism & Recreation
- [x] 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 Block

(Signature of Lobbyist)

1/29/2007

(Date)

PART V AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
Ryan Brennan	Principal

NAME OF ORGANIZATION (if applicable)	TELEPHONE
Advantage Capital Partners	707-945-0156
MAILING ADDRESS (Street)	**FAX**
10293 Silverado Trail	707-945-0161

(City)	(State)	(Zip Code)
Napa	CA	94558

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

Signature Block

(Signature of Authorizing Officer or Person Represented)

Jan. 29, 2007

(Date)