### LOBBYIST REGISTRATION STATEMENT

**Check applicable box:**  
- [X] New Registration  
- [ ] Amendment  
- [ ] Annual Renewal  
- [ ] Cancel Registration

#### Permanent business address

**Lobbyist or Lobbyist Organization Full Name:** Colin L. Hunter  
**Permanent Telephone Number:** 505-375-3200  
**Permanent Business Address:** 1905 Wyoming Blvd NE  
**City:** New  
**State:** NM  
**Zip Code:** 87112

#### Business address while lobbying or conducting lobbyist campaigning

**Business Address:**  
**City:**  
**State:**  
**Zip Code:**

#### Lobbyist Organization Chairperson

**Chairperson Full Name:** N/A  
**Telephone Number:**  
**Address:**  
**City:**  
**State:**  
**Zip Code:**

#### Lobbyist Organization Treasurer

**Treasurer Full Name:** N/A  
**Telephone Number:**  
**Address:**  
**City:**  
**State:**  
**Zip Code:**

#### Lobbyist Organization’s Bank and Checking Account Information

**Name of Bank:** N/A  
**Address:**  
**City:**  
**State:**  
**Zip Code:**  
**Checking Account Number:**

#### All parties with Signature Authority for Lobbyist Organization’s Checking Account

**Full Name:** N/A  
**Telephone Number:**  
**Address:**  
**City:**  
**State:**  
**Zip Code:**  
**Full Name:**  
**Telephone Number:**  
**Address:**  
**City:**  
**State:**  
**Zip Code:**
OFFICIAL ACTION FORM

Lobbyist’s Permanent business address

Lobbyist or Lobbyist Organization Full Name: Colin L Hunter
Permanent Telephone Number: 505.275.3200
Permanent Business Address: 1903 Wyoming Blvd ne
City: ABQ State: NM Zip Code: 87112

Official action the lobbyist or lobbyist organization supports or opposes


Lobbyist Official Action Bank and Checking Account Information

Name of Bank:
Address:
City: State: Zip Code:
Checking Account Number:

All parties with Signature Authority for Lobbyist’s Official Action Checking Account

Full Name:
Address:
City: State: Zip Code:

Full Name:
Address:
City: State: Zip Code:

I understand that I must file an Annual Registration Renewal every twelve months after the date of this registration, as long as I continue to perform lobbyist activities, as defined in the Lobbyist and Lobbyist Organization Registration and Disclosure Ordinance. In the event any change occurs in the above information, including but not limited to, new official actions supported or opposed, I am required to notify the City Clerk of changes within one month of such occurrence.

I swear or affirm that the above information is true and correct to the best of my knowledge

Signature: Date: 1/29/13
LOBBYIST'S EMPLOYERS
Lobbyist's Employers Information

Employer: RAT Services Company
Address: P.O. Box 44
City: Winston-Salem State: NC Zip Code: 27103

Employer: East/Cassidian
Address: 601 Gaylord Parkway, Suite 365
City: Frisco State: TX Zip Code: 75034

For additional employers, use a second form and attach to original.