



FORM
LOB
(Rev. 5/2013)

STATE OF HAWAII
STATE ETHICS COMMISSION



**HAWAII STATE ETHICS COMMISSION
LOBBYIST'S EXPENDITURES AND CONTRIBUTIONS REPORT**

REPORT YEAR: 2013 Amended Statement

For Lobbying Reporting Period: January 1 - last day of February March 1 - April 30 May 1 - December 31

LOBBYIST INFORMATION

WONG RACHAEL S.
Last Name First Name M.I.

HEALTHCARE ASSOCIATION OF HAWAII
Lobbyist Firm/Employer
707 RICHARDS STREET, PH2

Mailing Address (Number and Street or P.O. Box)

HONOLULU HI 96813
City State Zip Code

(808) 521-8961 Extension rwong@hah.org Email Address
Telephone

PART I. TOTAL EXPENDITURES (Attached Additional Sheets As Needed)

EXPENDITURES (ROUND TO THE NEAREST DOLLAR) MADE BY LOBBYIST FOR EACH ORGANIZATION REPRESENTED

Organization's Names	Preparation & Distribution of Lobbying Materials	Media Advertising	Postage	Fees Paid to Lobbyist	Entertainment & Events	Receptions, Meals, Food & Beverages	Gifts	Loans	Other Disbursements	EXPENDITURES	TOTAL
1.										0	0
2.											
3.											
4.											
5.											
6.											
7.											
8.											
9.											
10.											
11.											
12.											
13.											
14.											
15.											

16. Total Expenditures from Additional Attached Sheet(s) ▶

Add Total Expenditures (lines 1 through 16) ▶ Total Expenditures ▶ 0

