	FORM LOB (Rev. 5/2013)	Hawaii 2/3/20
HAWAII STATE FT	HICS COM	INSSION

Hawaii State Ethics Commmission Received 2/3/2014 6:29:28 AM

		_			S REPORT	
REPORT YEAR:	2013	Amended S	Statement			
For Lobbying Reportin	ng Period: January ⁻	1 - last day of Feb	ruary M	larch 1 - April 30	🖌 May 1 - De	cember 31
LOBBYIST INFOR	MATION					
Hochberg		LI	oyd		J	
Last Name		First Name			M.I.	
James Hochbe	erg, AAL					
Lobbyist Firm/Empl	loyer					
700 Bishop Sti	reet					
Suite 2100						
Mailing Address (N	umber and Street or P.O.	. Box)				
Honolulu				HI	g	6813
City				State	Z	Zip Code
534-1514		Jim@	JamesHoc	hbergLaw.co	om	
Telephone	Extension	Email A	ddress			
Organization's	Names	rees pairs 60. Ore mains	Receptions, services, toppyist	Meass Food Gits	Other Distursements	0
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EXPENDITURES OF \$25 OR MORE PER PERSON PER DAY

List all expenditures incurred by lobbyist for the purpose of lobbying of \$25 or more per person per day during the statement period.

Name	On Behalf of ORG		Amount or Value	
Check here if addition	onal sheets are attached			
	FURES OF \$150 OR MORE P bbyist for the purpose of lobbying in the	PER PERSON total sum of \$150 or more per person du	ring the statement period.	
Name	On Behalf of ORG	On Behalf of ORG		
Check here if addition	onal sheets are attached			
PART II. CONTRIBUTION	IS RECEIVED			
ist all contributions received by lo	bbyist for the purpose of lobbying in the	total sum of \$25 or more per person duri	ing the statement period.	
lame	On Behalf of ORG			
Hawaii Family Advo	ocates fees for lobby	ving paid to lobbyist	8831.71	
Check here if additie	onal sheets are attached			
PART III. SUBJECT ARE		orted or opposed during the statement p	period:	
Agriculture	Education	Human Services	Science, Technology & Economic Development	
Communications & Public Utilities	Government Operation & Finance	Intergovernmental Relations, International Affairs	V Tourism & Recreation	
Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employment	Transportation	
Culture, Arts, Historic Preservation	V Health	Planning, Land & Water Use Management	Other (indicate below):	
Ecology, Energy	Housing	Public Safety & Corrections	faith family and	
Environmental Protection			religious freedom	
AUTHORIZED PERSON				
Lloyd James Hochberg		Owner	1/29/2014	
Print Name of Authorized Person (First M.I. Last)		Title	Date (m/d/yyyy)	

CERTIFICATION: By checking this box, you signify and affirm that you are the person whose name appears as the "Authorized Person" above and the information contained in the form is true, correct and complete to the best of your knowledge and belief. You further certify that you understand that there are statutory penalties for failing to report the information required by Hawaii law.