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(Rev. 5/2013)

STATE OF HAWAII  
STATE ETHICS COMMISSION



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

REPORT YEAR: 2014  Amended Statement

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

#### LOBBYIST INFORMATION

Chin Douglas S.  
Last Name First Name M.I.  
Carlsmith Ball LLP  
Lobbyist Firm/Employer

1001 Bishop Street, Suite 2100  
Mailing Address (Number and Street or P.O. Box)

Honolulu HI 96813  
City State Zip Code  
(808) 523-2500 dchin@carlsmith.com  
Telephone Extension Email Address

#### 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 | Fees Paid to Lobbyist | Postage | Entertainment & Events | Receptions, Meals, Food & Beverages | Gifts | Loans | Other Disbursements | EXPENDITURES | TOTAL |
|--|--|-------------------|-----------------------|---------|------------------------|-------------------------------------|-------|-------|---------------------|--------------|-------|
| 1. Corrections Corp. of America                          | 0  | 0                 | 0                     | 0       | 0                      | 0                                   | 0     | 0     | 0                   | 0            | 0     |
| 2. Hawaii Pilots Association                             | 0  | 0                 | 0                     | 0       | 0                      | 0                                   | 0     | 0     | 0                   | 0            | 0     |
| 3. RBOAA   | 0  | 0                 | 0                     | 0       | 0                      | 0                                   | 0     | 0     | 0                   | 0            | 0     |
| 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.

REC'D BY HAND DELIVERY

**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 additional sheets are attached

**AGGREGATE EXPENDITURES OF \$150 OR MORE PER PERSON**

List all expenditures incurred by lobbyist for the purpose of lobbying in the total sum of \$150 or more per person during the statement period.

| Name | On Behalf of ORG | Amount or Value |
|------|------------------|-----------------|
|      |                  |                 |
|      |                  |                 |
|      |                  |                 |
|      |                  |                 |

Check here if additional sheets are attached

**PART II. CONTRIBUTIONS RECEIVED**

List all contributions received by lobbyist for the purpose of lobbying in the total sum of \$25 or more per person during the statement period.

| Name | On Behalf of ORG | Amount or Value |
|------|------------------|-----------------|
|      |                  |                 |
|      |                  |                 |
|      |                  |                 |
|      |                  |                 |

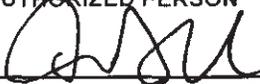
Check here if additional sheets are attached

**PART III. SUBJECT AREAS OF LOBBYING**

Legislative and/or administrative action in the following areas was supported or opposed during the statement period:

- 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

**AUTHORIZED PERSON**

  
 Print Name of Authorized Person (First M.I. Last)      Attorney      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.