

'15 MAR -3 A9 :33



FORM
LOB
(Rev. 5/2013)

STATE OF HAWAII
STATE ETHICS COMMISSION



HAWAII STATE ETHICS COMMISSION
LOBBYIST'S EXPENDITURES AND CONTRIBUTIONS REPORT

REPORT YEAR: 2015

Amended Statement

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

LOBBYIST INFORMATION

Ueoka
Last Name

Alison
First Name

H.
M.I.

Hawaii Insurers Council

Lobbyist Firm/Employer

1003 Bishop Street

Pauahi Tower Suite 2010

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

Honolulu

HI

96813

City

State

Zip Code

(808) 525-5877

aeoka@808insurers.org

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	Distribution of Lobbying Materials	Media Advertising & Preparation	Postage	Fees Paid by Lobbyist	Entertainment & Events	Food & Beverages	Receptions, Meals	Gifts	Other Disbursements	Loans	EXPENDITURES	TOTAL
1 Hawaii Insurers Council				6488								6488
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)												6488
Total Expenditures												6488

REC'D BY email

