



**FORM  
LOB**  
(Rev. 3/2015)

Hawaii State Ethics Commission Received  
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**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**

Maluafiti Alicia  
 Last Name First Name M.I.

Lobbyist Firm/Employer  
 PO Box 75345

Mailing Address (Number and Street or P.O. Box)  
 Kapolei HI 96707  
 City State Zip Code  
 808-224-3648 alicia@loihicomunications.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	Compensation Paid to Lobbyists	Fees Paid to Consultants or Services	Entertainment & Consultants	Receptions, Meals, Food & Beverages	Gifts	Loans	Other Disbursements	EXPENDITURES	TOTAL
1. BIO											
2. CropLife America											
3. HCIA											
4. CAI											
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

**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                      Condos/PCAs

**AUTHORIZED PERSON**

Alicia Maluafiti                      Consultant                      5/31/2015  
Type Name of Authorized Person (First M.I. Last)                      Title                      Date (m/d/yyyy)

**CERTIFICATION:** By checking this box or signing your name on this form, 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.