



FORM
ORG
(Rev. 5/2012)



HAWAII STATE ETHICS COMMISSION
ORGANIZATION'S EXPENDITURES AND CONTRIBUTIONS REPORT

13 MAR 13 P1 59

REPORT YEAR: 2013

Amended Statement

For Lobbying Reporting Period: January 1 - last day of February

March 1 - April 30

May 1 - December 31

STATE OF HAWAII
STATE ETHICS COMMISSION

ORGANIZATION INFORMATION

Aina Nui Corporation

David W. Rae

Organization Name

Contact Person

James Campbell Building

1001 Kamokila Blvd., Suite 250

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

Kapolei

HI

96707

City

State

Zip Code

(808) 674-3117

daver@kapolei.com

Telephone

Extension

Email Address

PART I. TOTAL EXPENDITURES

	Total Amount
1 Preparation & Distribution of Lobbying Materials _____ 1	0.00
2 Media Advertising _____ 2	0.00
3 Postage _____ 3	0.00
4 Compensation Paid to Lobbyists (Attached Additional Sheets As Needed) <i>List the names of all lobbyists and compensation paid to lobbyists during the statement period</i>	
Lobbyist Name	Compensation Paid
A. <u>David W. Rae</u>	A. <u>0.00</u>
B. _____	B. _____
C. _____	C. _____
D. _____	D. _____
E. _____	E. _____
F. _____	F. _____
G. Total from Additional Attached Sheet(s) _____	G. <u>0.00</u>
Add lines A through G _____ Total Compensation Paid ▶ 4	0.00
5 Fees Paid to Consultants (other than to Lobbyists) _____ 5	0.00
6 Entertainment & Events _____ 6	0.00
7 Receptions, Meals, Food & Beverages _____ 7	0.00
8 Gifts _____ 8	0.00
9 Loans _____ 9	0.00
10 Other Disbursements _____ 10	0.00
Add lines 1 through 10 _____ Total Expenditures ▶	0.00

EXPENDITURES OF \$25 OR MORE PER PERSON PER DAY

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

Name & Address	Amount or Value

Check here if additional sheets are attached

AGGREGATE EXPENDITURES OF \$150 OR MORE PER PERSON

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

Name & Address	Amount or Value

Check here if additional sheets are attached

PART II. CONTRIBUTIONS RECEIVED

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

Name & Address	Amount or Value

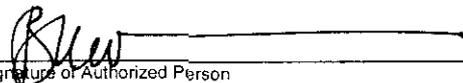
Check here if additional sheets are attached

PART III. SUBJECT AREAS OF LOBBYING

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

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> Agriculture | <input checked="" type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input checked="" type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input checked="" type="checkbox"/> Government Operation & Finance | <input checked="" type="checkbox"/> Intergovernmental Relations, International Affairs | <input checked="" type="checkbox"/> Tourism & Recreation |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input checked="" type="checkbox"/> Hawaiian Affairs | <input type="checkbox"/> Labor & Employment | <input checked="" type="checkbox"/> Transportation |
| <input checked="" type="checkbox"/> Culture, Arts, Historic Preservation | <input type="checkbox"/> Health | <input checked="" type="checkbox"/> Planning, Land & Water Use Management | <input type="checkbox"/> Other (indicate below): |
| <input checked="" type="checkbox"/> Ecology, Energy Environmental Protection | <input checked="" type="checkbox"/> Housing | <input type="checkbox"/> Public Safety & Corrections | _____ |

I hereby certify that the statements made above are correct and complete to the best of my knowledge


Signature of Authorized Person

Bradford J. Myers

Print Name

3/11/13
Date

President

Title