



FORM  
ORG  
(Rev 5/2013)

13 MAY 20 P4:18



HAWAII STATE ETHICS COMMISSION  
ORGANIZATION'S EXPENDITURES AND CONTRIBUTIONS REPORT

STATE OF HAWAII  
STATE ETHICS COMMISSION

REPORT YEAR: 2013  Amended Statement

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

ORGANIZATION INFORMATION

Organization Name Animal Haven Contact Person Frank DeGiacomo

Mailing Address (Number and Street or P.O. Box) P.O. Box 4406

City Kaneohe State Hawaii Zip Code 96744

Telephone 799-7791 Extension \_\_\_\_\_ Email Address AnimalHavenHawaii@gmail.com

PART I. TOTAL EXPENDITURES

	Total Amount
1 Preparation & Distribution of Lobbying Materials	1 <u>0</u>
2 Media Advertising	2 <u>0</u>
3 Postage	3 <u>0</u>
4 Compensation Paid to Lobbyists <b>(Attached Additional Sheets As Needed)</b> <i>List the names of all lobbyists and compensation paid to lobbyists during the statement period</i>	
Lobbyist Name	Compensation Paid
A. <u>Frank DeGiacomo</u>	A. <u>0</u>
B. _____	B. _____
C. _____	C. _____
D. _____	D. _____
E. _____	E. _____
F. _____	F. _____
G. Total from Additional Attached Sheet(s)	G. _____
Add lines A through G	Total Compensation Paid ▶ 4 <u>0</u>
5 Fees Paid to Consultants (other than to Lobbyists)	5 <u>0</u>
6 Entertainment & Events	6 <u>0</u>
7 Receptions, Meals, Food & Beverages	7 <u>0</u>
8 Gifts	8 <u>0</u>
9 Loans	9 <u>0</u>
10 Other Disbursements	10 <u>0</u>
Add lines 1 through 10	Total Expenditures ▶ <u>0</u>

**EXPENDITURES OF \$25 OR MORE PER PERSON PER DAY**

Name and address of each person with respect to whom expenditures for the purpose of lobbying in the total sum of \$25 or more in any single calendar day was made and amount or value of expenditures.

Name & Address	Amount or Value

Check here if additional sheets are attached

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

Name and address of each person with respect to whom expenditures for the purpose of lobbying in the aggregate of \$150 or more was made during the statement period and amount or value of expenditures.

Name & Address	Amount or Value

Check here if additional sheets are attached

**PART II. CONTRIBUTIONS RECEIVED**

Name and address of each person making contributions to the filer for purposes of lobbying in the total sum of \$25 or more during the statement period and the amount or value of such contribution.

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.

- 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
- animal issues

**AUTHORIZED PERSON**

Frank L. DeGiacomo                      Pres.                      5/15/13  
 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.