HAWAII STATE ETHICS COMMISSION
ORGANIZATION'S EXPENDITURES AND CONTRIBUTIONS REPORT

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

Common Cause Hawaii — Organization Name

Carmille Lim — Contact Person

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PO Box 22703 — Mailing Address (Number and Street or P.O. Box)

STATE OF HAWAII
STATE ETHICS COMMISSI

Honolulu — City

HI — State

96823 — Zip Code

(808) 275-6275 — Telephone

Extension

clim@commoncause.org — Email Address

PART I. TOTAL EXPENDITURES

			Total Amount
1	Preparation & Distribution of Lobbying Materials	1	165.55
2	Media Advertising	2	
3	Postage	3	0.95
4	Compensation Paid to Lobbyists *(Attached Additional Sheets As Needed)* *List the names of all lobbyists and compensation paid to lobbyists during the statement period*		

Lobbyist Name	Compensation Paid
A. Carmille Lim	A. 5,000.00
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	5,000.00
5	Fees Paid to Consultants (other than to Lobbyists)	5	
6	Entertainment & Events	6	
7	Receptions Meals, Food & Beverages	7	
8	Gifts	8	
9	Loans	9	
10	Other Disbursements	10	125.66
	Add lines 1 through 10	**Total Expenditures ▶**	5,292.16

RECEIVED BY U.S. MAIL

Name & Address	Amount or Value
N/A	

☐ **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
N/A	

☐ **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
N/A	

☐ **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	

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

Signature of Authorized Person: [signature] Date: [signature] 01/09/2013

Carmille Lim — Print Name

Executive Director — Title