



FORM  
ORG  
(Rev. 5/2012)



**HAWAII STATE ETHICS COMMISSION  
ORGANIZATION'S EXPENDITURES AND CONTRIBUTIONS REPORT**

'13 APP -1 P4 :56

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**

Hawaii Crop Improvement Association  
Organization Name  
PO Box 75345

Alicia Maluafiti  
Contact Person

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

Kapolei

HI

96707

City

State

Zip Code

(808) 224-3648

director@hciaonline.com

Telephone

Extension

Email Address

**PART I. TOTAL EXPENDITURES**

		Total Amount
1	Preparation & Distribution of Lobbying Materials	1
2	Media Advertising	2
3	Postage	3
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.	Alicia Maluafiti	4,600.00
B.		
C.		
D.		
E.		
F.		
G.	Total from Additional Attached Sheet(s)	
	Add lines A through G	Total Compensation Paid ▶ 4,600.00
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
	Add lines 1 through 10	Total Expenditures ▶ 4,600.00

**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 type="checkbox"/> Education                      | <input type="checkbox"/> Human Services                                     | <input checked="" type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities                   | <input type="checkbox"/> Government Operation & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation                                  |
| <input type="checkbox"/> Consumer Protection & Commerce                      | <input type="checkbox"/> Hawaiian Affairs               | <input type="checkbox"/> Labor & Employment                                 | <input type="checkbox"/> Transportation  |
| <input 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 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  
 Alicia Maluafiti  
 Print Name

3/29/2013  
 Date  
 Executive Director  
 Title