



FORM  
ORG  
(Rev. 5/2012)



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

'13 MAY 22 P12:21

REPORT YEAR: 2013  Amended Statement

STATE OF HAWAII  
STATE ETHICS COMMISSION

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

**ORGANIZATION INFORMATION**

KAUAI ISLAND UTILITY COOPERATIVE  
Organization Name  
4463 PAHEE STREET, SUITE #1

MICHAEL YAMANE  
Contact Person

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

LIHUE

HI

96766

City

State

Zip Code

(808) 246-8208

MYAMANE@KIUC.COOP

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 <i>(Attached Additional Sheets As Needed)</i> <i>List the names of all lobbyists and compensation paid to lobbyists during the statement period</i>	
	Lobbyist Name	Compensation Paid
A.	SPJ CONSULTING, LLC	20,942.40
B.		
C.		
D.		
E.		
F.		
G.	Total from Additional Attached Sheet(s)	
	Add lines A through G	Total Compensation Paid ▶ 4 20,942.40
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 ▶ 20,942.40

**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
	0.00

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
	0.00

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
	0.00

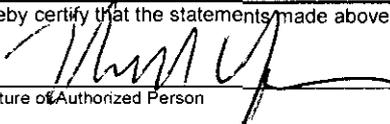
Check here if additional sheets are attached

**PART III. SUBJECT AREAS OF LOBBYING**

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

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> Agriculture   | <input type="checkbox"/> Education                      | <input type="checkbox"/> Human Services                                     | <input checked="" type="checkbox"/> Science, Technology & Economic Development |
| <input checked="" type="checkbox"/> Communications & Public Utilities        | <input type="checkbox"/> Government Operation & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation                                  |
| <input checked="" 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 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  
 MICHAEL YAMANE  
 Print Name

5/14/2013  
 Date  
 CHIEF OF OPERATIONS  
 Title