



FORM
ORG
(Rev. 5/2012)



HAWAII STATE ETHICS COMMISSION
ORGANIZATION'S EXPENDITURES AND CONTRIBUTIONS REPORT

13 MAR 12 P2:26

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

Molokai General Hospital
Organization Name
PO Box 408

Carla Dudoit
Contact Person

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

Kaunakakai

HI

96748

City

State

Zip Code

(808) 553-3165

cdudoit@queens.org

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. | Janice Kalanihulia | 0.00 |
| B. | Noa Emmett Aluli, M.D. | 0.00 |
| C. | | |
| D. | | |
| E. | | |
| F. | | |
| G. | Total from Additional Attached Sheet(s) | |
| | Add lines A through G | Total Compensation Paid ▶ 4 0.00 |
| 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 ▶ 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 |
|----------------|-----------------|
| | |
| | |
| | |
| | |
| | |

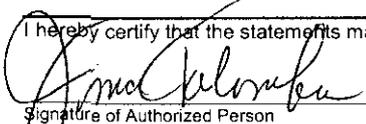
Check here if additional sheets are attached

PART III. SUBJECT AREAS OF LOBBYING

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

- 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

3/8/13

Date

Janice Kalanihulia

President

Print Name

Title