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FORM
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(Rev. 5/2013)

STATE OF HAWAII
STATE ETHICS COMMISSION



HAWAII STATE ETHICS COMMISSION
ORGANIZATION'S EXPENDITURES AND CONTRIBUTIONS REPORT

REPORT YEAR: 2014 ☐ Amended Statement
For Lobbying Reporting Period: ☒ January 1 - last day of February ☐ March 1 - April 30 ☐ May 1 - December 31

ORGANIZATION INFORMATION

Organization Name Babies Against Broken Contact Person Naomi Carmona

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

P.O. Box 11897
City Honolulu State HI Zip Code 96828
Telephone 808 436 7666 Extension N/A Email Address naomi@babiesagainstbroken.org

PART I. TOTAL EXPENDITURES

		Total Amount
1	Preparation & Distribution of Lobbying Materials	<u>0.00</u>
2	Media Advertising	<u>0.00</u>
3	Postage	<u>0.00</u>
4	Compensation Paid to Lobbyists (Attached Additional Sheets As Needed) <small>List the names of all lobbyists and compensation paid to lobbyists during the statement period</small>	
	Lobbyist Name	Compensation Paid
A.	<u>Naomi Carmona (not yet paid)</u>	<u>\$5,000.00</u>
B.	<u>N/A</u>	
C.		
D.		
E.		
F.		
G.	Total from Additional Attached Sheet(s)	
Add lines A through G		Total Compensation Paid ▶ <u>4</u> <u>5,000.00 (to be paid)</u>
5	Fees Paid to Consultants (other than to Lobbyists)	<u>0.00</u>
6	Entertainment & Events	<u>0.00</u>
7	Receptions, Meals, Food & Beverages	<u>1,000.00</u>
8	Gifts	<u>0.00</u>
9	Loans	<u>0.00</u>
10	Other Disbursements	<u>0.00</u>
Add lines 1 through 10		Total Expenditures ▶ <u>\$6,000.00</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

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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
Colleen Mellor 58-0233 Kapaeha Pt, Haleiwa, HI 96741	50.00
Diane Kanealii 61-4011 Kailapa St., Kaneohe, HI 96742	50.00
Ma Fuimaono 304 Iolani Ave #10 Honolulu, HI 96813	50.00
Lynia You PO Box 302040 Kailua, H.I. 96731	50.00

☒ 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 checked="" type="checkbox"/> Agriculture | <input checked="" type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input checked="" type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input checked="" type="checkbox"/> Government Operation & Finance | <input checked="" type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input checked="" type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input checked="" 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 checked="" type="checkbox"/> Public Safety & Corrections | |

AUTHORIZED PERSON

Print Name of Authorized Person (First M.I. Last) Nona Sharone Caemmer Title President Date (m/d/yyyy) 4/16/14

☒ **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.

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Name & Address	Amount or Value
Sarah Smith 3935 Pineapple Princeville, HI 96722	50.00
Rena Rodriguez 441 Kalia Rd. Honolulu HI 96821	100.00
Jennifer Tyler 1481 Waiwae Rd # Kapaa HI 96746	100.00
Lordani Keohokale POB 675 Anahola, HI 96703	50.00

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AUTHORIZED PERSON

Naomi Shapiro Carmone President 4/10/14
Print Name of Authorized Person (First M.I. Last) Title Date (m/d/yyyy)

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Name & Address	Amount or Value
Lyle Robinson 7443 Koolaula Kilauea, HI 96754	50.00
Rachel Hill Six Fours Les Plages 83140 FR	30.00
Sally Skanderup 44-600 Kameh Bay Dr Kaneohe, HI 96744	50.00
Blair Townley 264 Hekalan Pl. Honolulu, HI 96825	500.00

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AUTHORIZED PERSON

Natomi Shaone Caemona President 4/10/14
Print Name of Authorized Person (First MI Last) Title Date (m/d/yyyy)

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Name & Address	Amount or Value
Karen Chun 87 Lee St. Paia, HI 96779	50.00
Caroline Kung 3711 Mahina Ave, Honolulu, HI 96816	50.00
Puanani Rogers 4762 Malihuna Rd, Paia, HI 96796	50.00
Thomas Engle 1345 Ohina Pl, Honolulu, HI 96825	30.00

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AUTHORIZED PERSON

Wakmi Sharonie Casanova _____ President _____ 4/6/14
 Print Name of Authorized Person (First M.I. Last) Title Date (m/d/yyyy)

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Name & Address	Amount or Value
Sunny Savage 744 Hamana Place Haku, HI 96708	1,130.00
Howie Simon, Lotus Cafe 73-5617 Maiau St., Ste 1 Kailua-Kona, HI 96740	50.00
Jacqueline Winter 1504 Halekua Dr. Honolulu, HI 96821	50.00
Debra Szarka 26442 Primrose Lane, Westlake, OH 44115	50.00

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PART III. SUBJECT AREAS OF LOBBYING

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<input type="checkbox"/> Communications & Public Utilities	<input checked="" type="checkbox"/> Government Operation & Finance	<input checked="" type="checkbox"/> Intergovernmental Relations, International Affairs	<input type="checkbox"/> Tourism & Recreation
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AUTHORIZED PERSON

Natomi SANCHEZ CARMONA President 4/10/14
 Print Name of Authorized Person (First M.I. Last) Title Date (m/d/yyyy)

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Name & Address	Amount or Value
Lori Higa PO Box 342040 45-1054 Kamehamehatti Kowalehi HI 96744	50.00
Shantee Brown 73-1105 Lolua Drive Kailua-Kona, HI 96740	100.00
Arvid Drolson PO Box 405 405 Kilauea, HI 96754	50.00
Harvest Edmunds PO Box 679 Kilauea, HI 96754	30.00


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- | | | | |
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AUTHORIZED PERSON

 (Naomi) President 4/10/14
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Name & Address	Amount or Value
Wendy Gibson 3929 Lanipili Place Honolulu, HI 96816	50.00
Tiffany McDaniel 9190 Sue Circle Leland, NC 28451	50.00
Annie Suite PO Box 1395 Kailua, HI 96734	50.00
Joseph Scandone 92-1136 Hame St. #10-101 Kapolei, HI 96767	50.00

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AUTHORIZED PERSON

Nkomi Sharone Carmona President 4/10/14
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Name & Address	Amount or Value
Warren Erisch III Hekeli St. A201 Kailua, HI 96734	50.00
Chiharu Tsukidate PO Box 21 Wailua, HI 96791-0021	50.00
Angela Breene 59-410 C Kamehameha Hwy Halaiva, HI 96743	30.00
Theodore Mack 3700 Bellwood Dr Tallahassee, FL 32303	50.00

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PART III. SUBJECT AREAS OF LOBBYING

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AUTHORIZED PERSON

Sharon Carmichael President 4/10/14
Print Name of Authorized Person (First M.I. Last) Title Date (m/d/yyyy)

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Michele Kahler 58-304 Kamele Pl Haleiwa, HI 96712	50.00
Barbara Saitz 22 Kalapa Pl Hahaione, HI 96708	5,000.00
Michael Kraner PO Box 3405 Keanah, HI 96739	100.00
Sharon Wileford PO Box 39005 Keanah, HI 96739	25.00

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AUTHORIZED PERSON

Naomi Sharon O'Brien President 4/10/14
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Name & Address	Amount or Value
Barbara Barry 88 Manina Circle #206 Kihai, HI 96753	100.00
Diane Parker 189 Vailua Beach Rd Haleiwa, HI 96721	50.00
Carol Sappington 92-710 Paakai St. Kapolei, HI 96767	50.00
Cynthia Rubinstein PO Box 1207 Kaneohe, HI 96741	50.00


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 Naomi Shaeffer-Carmon President 4/10/14
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☐ 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
Julie Hirschfeld 4691 Pelehu Rd Kapaa, HI 96746	50.00
Nolga Raimondi 33 Rockridge Rd. Mansfield, CT 06268	50.00
Josh Cole 551 Main St. Watertown, MA 02472	58.00
Tatiana Korman 684 4th Ave San Francisco, CA 94101	30.00

☒ 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 checked="" type="checkbox"/> Agriculture | <input checked="" type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input checked="" type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input checked="" type="checkbox"/> Government Operation & Finance | <input checked="" type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input checked="" type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input checked="" 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 | |

AUTHORIZED PERSON

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.

Submit Form

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
Roy Shinalaka PO Box 95 Waiman, HI 96796	30.00
Emily Benson 35 View St Apt 204 Aurora, IL 60506	100.00
Maria Maitano PO Box 1097 Kilauea, HI 96754	50.00
Lana Rubie 1836 Fire Mountain Dr, Oceanside, CA 92054	51.00

☒ 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 checked="" type="checkbox"/> Agriculture | <input checked="" type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input checked="" type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input checked="" type="checkbox"/> Government Operation & Finance | <input checked="" type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input checked="" type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input checked="" 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 | |

AUTHORIZED PERSON

NAMI, Sharone Carmona President 4/10/14
 Print Name of Authorized Person (First M.I. Last) Title Date (m/d/yyyy)

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Name & Address	Amount or Value

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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
Trudi Sutherland 15-2380 Kawakawa St., Pahoa, HI 96782	50.00
Minsky Bouquet Box 344 Hanalei, HI 96721	50.00
Lisa Smith 903 South Jensen Ave, Carbondale, IL 62901	50.00
Pamela Detrich PO Box 1412 Tucson, AZ 85702-1412	50.00

☒ 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 checked="" type="checkbox"/> Agriculture | <input checked="" type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input checked="" type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input checked="" type="checkbox"/> Government Operation & Finance | <input checked="" type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input checked="" type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input checked="" 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 | |

AUTHORIZED PERSON

Naomi Sheeane Coomins President 4/10/14
 Print Name of Authorized Person (First M.I. Last) Title Date (m/d/yyyy)

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Name & Address	Amount or Value

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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
Sanne Zavala 812 Olivia St. Key West, FL 33040	50.00
Luan Van Le 3411 Shea Ct. Arlington, TX 76014	50.00
Shari Pilapia 2551 Ala Moana C. Koloa, HI 96756	80.00
Christina Hilberg 110A Heather Way, Yorktown VA 23693	150.00

☒ 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 checked="" type="checkbox"/> Agriculture | <input checked="" type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input checked="" type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input checked="" type="checkbox"/> Government Operation & Finance | <input checked="" type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input checked="" type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input checked="" 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 checked="" type="checkbox"/> Public Safety & Corrections | |

AUTHORIZED PERSON

Print Name of Authorized Person (First M.I. Last) Natomi Sharon Casanova Title President Date (m/d/yyyy) 4/10/14

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Name & Address	Amount or Value

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AGGREGATE EXPENDITURES OF \$150 OR MORE PER PERSON

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Name & Address	Amount or Value

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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
Kim Houston 9255 Jewel Lake Rd #2 Anchorage, AK 99582	50.00
Carie Martell, North Shore Womens Expo 621-205 Kaneohe, HI 96741	1000.00
Michelle Blake 1489 Kaneohe Rd, Kapaa, HI 96746	50.00
Joni Pennington 14100 Ridgeview Lane Lake Ann, MI 49650	2500

☒ 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 checked="" type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input checked="" type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input checked="" type="checkbox"/> Government Operation & Finance | <input checked="" type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input checked="" type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input checked="" 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 checked="" type="checkbox"/> Public Safety & Corrections | |

AUTHORIZED PERSON

Naomi Shapiro Carmona President 4/10/14
 Print Name of Authorized Person (First M.I. Last) Title Date (m/d/yyyy)

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Name & Address	Amount or Value

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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
Jane Fossen 11831 Upper Applegate Rd, Jacksonville, OR 97530	100.00
J. Chen PO Box 1807 Pahoa, HI 96778	50.00
Keri Amaseat 792 Kula Place Kula, HI 96790	100.00
Brian Lehmann 717 Makena Dr Apt B Wailuku, HI 96793	50.00

☒ 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 checked="" type="checkbox"/> Agriculture | <input checked="" type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input checked="" type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input checked="" type="checkbox"/> Government Operation & Finance | <input checked="" type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input checked="" type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input checked="" 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 checked="" type="checkbox"/> Public Safety & Corrections | |

AUTHORIZED PERSON

Noomi Sharone Carmine President 4/6/14
Print Name of Authorized Person (First M.I. Last) Title Date (m/d/yyyy)

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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

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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

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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
Melia Leslie 94-852 Lelepuia St #254 Waipahu, HI 96794	50.00
Rick Morse 2717 S. King St #304 Honolulu, HI 96826	100.00
Victoria H. Pappas PO Box 1209 Kilauea, HI 96754	30.00
Stephanie Ortega PO Box 9632 Aspen, CO 81612	50.00

☒ 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 checked="" type="checkbox"/> Agriculture | <input checked="" type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input checked="" type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input checked="" type="checkbox"/> Government Operation & Finance | <input checked="" type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input checked="" type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input checked="" 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 checked="" type="checkbox"/> Public Safety & Corrections | |

AUTHORIZED PERSON

Naomi Shapiro Caproni President 4/10/14
 Print Name of Authorized Person (First M.I. Last) Title Date (m/d/yyyy)

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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

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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

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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
Kathryn Vian 4348 Wai'alae Ave #248 Honolulu HI 96816	250.00
Holly Henderson 1025 Wilder Ave #113 Honolulu HI 96813	100.00
Lisa Kennedy 1120 Punopua Rd Kapaa, HI 96746	25.00
Keoki Medeiros 471 Liholiho St. #8 Wailuku, HI 96793	100.00

☒ 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 checked="" type="checkbox"/> Agriculture | <input checked="" type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input checked="" type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input checked="" type="checkbox"/> Government Operation & Finance | <input checked="" type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input checked="" type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input checked="" 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 checked="" type="checkbox"/> Public Safety & Corrections | |

AUTHORIZED PERSON

<u>Nkani Shapone Capmona</u>	<u>President</u>	<u>W/10/11</u>
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.

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AGGREGATE EXPENDITURES OF \$150 OR MORE PER PERSON

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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
Braxton Reed 4270 Evening Ridge Ter, Meriden, CT 06450	30.00
Jeri A. Pierce PO Box 338 Koloa, HI 96756	50.00
Jen Homay 66-219 Kanehachua Hwy Apt C Hialeah, HI 96720	50.00
Meleane Judd 54-414 Kanehachua Hwy Hialeah, HI 96720	25.00

☒ 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 checked="" type="checkbox"/> Agriculture | <input checked="" type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input checked="" type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input checked="" type="checkbox"/> Government Operation & Finance | <input checked="" type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input checked="" type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input checked="" 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 checked="" type="checkbox"/> Public Safety & Corrections | |

AUTHORIZED PERSON

NADMI STABONE CAEMONA President 4/10/14
 Print Name of Authorized Person (First M.I. Last) Title Date (M/d/yyyy)

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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
Karen Kilimnik 247 Righier Sterry Rd, Bala Cynwyd, PA 19004	50.00
Bryce Boedler PO Box 1059 Wainana HI 96796	30.00
Karen Ryan 4038 Mahinahua Lahaia HI 96761	50.00
Adelaide Zimmer PO Box 843 Vainaa HI 96796	50.00

☒ 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 checked="" type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input checked="" type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input checked="" type="checkbox"/> Government Operation & Finance | <input checked="" type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input checked="" type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input checked="" 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 checked="" type="checkbox"/> Public Safety & Corrections | |

AUTHORIZED PERSON

W Naomi Shapiro Calmuna President 4/10/14
Print Name of Authorized Person (First M.I. Last) Title Date (m/d/yyyy)

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AGGREGATE EXPENDITURES OF \$150 OR MORE PER PERSON

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Name & Address	Amount or Value

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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
Ellen Walraven POBox 1171 Lanai, HI 96765	50.00
Nadya Penoff 4896 Ogram Rd Santa Barbara, CA 93102	50.00
Mike Shon 3337 Halelani Dr Honolulu, HI 96822	50.00
Claire Calladine 1424 SE Harney St Portland, OR 97202	100.00

☒ 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 checked="" type="checkbox"/> Agriculture | <input checked="" type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input checked="" type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input checked="" type="checkbox"/> Government Operation & Finance | <input checked="" type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input checked="" type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input checked="" type="checkbox"/> Health | <input checked="" type="checkbox"/> Planning, Land & Water Use Management | <input type="checkbox"/> Other (indicate below): |
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AUTHORIZED PERSON

Natomi Sharon Carmone President 4/10/14
 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.

Submit Form

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
Cathy Harbort 418 La Comp Rd Camano Island WA 98282	50.00
Will & Susan Revak PO Box 516026 Kealia HI 96751	50.00
Michelle Aquino 156 Hamakua Dr. #734 Keahuna HI 96734	100.00
Bailey Schneider 4344 Kuke St. Kaneohe HI 96754	111.00

☒ 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 checked="" type="checkbox"/> Agriculture | <input checked="" type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input checked="" type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input checked="" type="checkbox"/> Government Operation & Finance | <input checked="" type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input checked="" type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input checked="" 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 checked="" type="checkbox"/> Public Safety & Corrections | |

AUTHORIZED PERSON

Naomi Sharon Caprona President 4/10/14
 Print Name of Authorized Person (First M.I. Last) Title Date (m/d/yyyy)

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