



FORM  
ORG  
(Rev. 3/2015)

STATE OF HAWAII  
STATE ETHICS COMMISSION



HAWAII STATE ETHICS COMMISSION  
ORGANIZATION'S EXPENDITURES AND CONTRIBUTIONS REPORT

REPORT YEAR: 2015  Amended Statement

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

ORGANIZATION INFORMATION

HAWAII MEDICAL ASSOCIATION  
Organization Name  
1360 S BERETANIA ST., STE 200

JESSICA NICHOLS  
Contact Person

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

HONOLULU

HI

96814

City

State

Zip Code

(808) 536-7702

108

JNICHOLS@HMA-ASSN.ORG

Telephone

Extension

Email Address

PART I. TOTAL EXPENDITURES

	<i>Total Amount</i>
1 Preparation & Distribution of Lobbying Materials.....	1 _____
2 Media Advertising.....	2 _____
3 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. <u>LSZ CONSULTING</u>	A. <u>7,200.00</u>
B. <u>CHRISTOPHER FLANDERS</u>	B. <u>539.20</u>
C. _____	C. _____
D. _____	D. _____
E. _____	E. _____
F. _____	F. _____
G. Total from Additional Attached Sheet(s).....	G. _____
Add lines A through G..... Total Compensation Paid ▶	3 <u>7,739.20</u>
4 Fees Paid to Consultants or Services .....	4 _____
5 Entertainment & Events.....	5 _____
6 Receptions, Meals, Food, & Beverages .....	6 _____
7 Gifts .....	7 _____
8 Loans .....	8 _____
9 Other Disbursements.....	9 _____
Add lines 1 through 9 .....	Total Expenditures ▶ <u>7,739.20</u>

