



**FORM  
ORG**  
(Rev. 3/2015)

Hawaii State Ethics Commission Received  
3/11/2016 9:28:03 AM



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

REPORT YEAR: 2016  Amended Statement  
 For Lobbying Reporting Period:  January 1 - last day of February  March 1 - April 30  May 1 - December 31

**ORGANIZATION INFORMATION**

UHA Health Insurance Howard K.F. Lee  
 Organization Name Contact Person  
 700 Bishop Street, Bishop Tower, 3rd Floor  
  
 Mailing Address (Number and Street or P.O. Box)  
 Honolulu HI 96813  
 City State Zip Code  
 (808) 532-2526 hlee@uhahealth.com  
 Telephone Extension Email Address

**PART I. TOTAL EXPENDITURES**

		<b>Total Amount</b>
1 Preparation & Distribution of Lobbying Materials.....	1	0
2 Media Advertising.....	2	0
3 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. <u>George A. "Red" Morris</u>	A. _____	0
B. <u>John H. Radcliffe</u>	B. _____	0
C. <u>Bruce Coppa</u>	C. _____	0.00
D. <u>Blake Oshiro</u>	D. _____	0
E. <u>Celeste Y.K. Nip</u>	E. _____	0
F. <u>Ross Yamasaki &amp; Melissa Takaaze</u>	F. _____	0
G. Total from Additional Attached Sheet(s).....	G. _____	
Add lines A through G.....	Total Compensation Paid ▶ 3	0.00
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 ▶	0.00

