HAWAII STATE ETHICS COMMISSION
ORGANIZATION'S OR INDIVIDUAL'S EXPENDITURES AND CONTRIBUTIONS REPORT

(To be filed by organizations, employing organizations and individuals other than registered lobbyists)

FORM ORG
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AWAII STATE ETHICS COMMISSION
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r lobbying reporting period:
] January 1 - last day of February
X March 1 - April 30
] May 1 - December 31
ar of Report 20____

Contact person Marilyn Roberts Nonaka Phone 396-9168
Organization Hawaii Dental Hygienists' Association
Mailing Address P.O. Box 23313
Honolulu, HI 96823

PART I. TOTAL EXPENDITURES

The total sum or value of all expenditures for the purpose of lobbying during the statement period was: $ 3,149.07

EXPENDITURES

Category	Total Amount	Category	Total Amount
1. Preparation & distribution of lobbying materials		7. Entertainment	
2. Media advertising		8. Food & beverages	
3. Telegraph, telephone and other forms of telecommunication		9. Gifts	
4. Postage		10. Loans	
5. Compensation paid to lobbyists	$3,149.07	11. Other disbursements	
6. Fees (other than to lobbyists)		TOTAL EXPENDITURES	

COMPENSATION PAID TO LOBBYISTS

st in this section the names of all lobbyists and compensation paid to the lobbyists during the statement period.

Name	Address	Compensation paid
illiam Kaneko associated with Alston, Hunt, Floyd & Ing	P.O. Box 2281 18th Floor Pacific Tower 1001 Bishop St. Honolulu, HI 96818	$3,149.07

EXPENDITURES OF $25 OR MORE PER PERSON PER DAY

t in this section all expenditures incurred for the purpose of lobbying of $25 or more per person per day during the statement period.

☐ This section is not applicable

☐ Expenditures incurred in the total sum of $25 or more per person per day were made for the following persons:

Name & Address	Amount or value

AGGREGATE EXPENDITURES OF $150 OR MORE PER PERSON

t in this section all expenditures incurred for the purpose of lobbying in the total sum of $150 or more per person during the statement period.

☐ This section is not applicable

☐ Expenditures incurred in the aggregate of $150 or more per person were made for the following persons:

Name & Address	Amount or value

PART II. CONTRIBUTIONS RECEIVED

t in this section all contributions received for the purpose of lobbying in the total sum of $25 or more per person during the statement period.

☒ This section is not applicable

☐ Contributions received in the total sum of $25 or more per person were received from the following persons:

Name & Address	Amount or value

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	

hereby certify that the statements made above are correct and complete to the best of my knowledge

Signature Block

(Signature of authorized person) 6/21/05 (Date)

Name of authorized person (type or print) Marilyn Roberts Nonaka

Title of authorized person President, Hawaii Dental Hygienists' Association