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

**FORM ORG**

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


HAWAII STATE ETHICS COMMISSION
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For lobbying reporting period:

[ ✔ ] January 1 - last day of February
[ ] March 1 - April 30
[ ] May 1 - December 31

Year of Report 20 05

Contact person: Janice Kalanihuia — Phone: (808) 553-3123

Organization: Molokai General Hospital

Mailing address: P.O. Box 408
Kaunakakai, HI 96748

## PART I. TOTAL EXPENDITURES

The total sum or value of all expenditures for the purpose of lobbying during the statement period was: $ 0.00

### EXPENDITURES

| Category | Total Amount | Category | Total Amount |
|---|---|---|---|
| 1. Preparation & distribution of lobbying materials | 0.00 | 7. Entertainment | 0.00 |
| 2. Media advertising | 0.00 | 8. Food & beverages | 0.00 |
| 3. Telegraph, telephone and other forms of telecommunication | 0.00 | 9. Gifts | 0.00 |
| 4. Postage | 0.00 | 10. Loans | 0.00 |
| 5. Compensation paid to lobbyists | 0.00 | 11. Other disbursements | 0.00 |
| 6. Fees (other than to lobbyists) | 0.00 | TOTAL EXPENDITURES | 0.00 |

### COMPENSATION PAID TO LOBBYISTS

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

| Name | Address | Compensation paid |
|---|---|---|
| Janice Kalanihuia | P.O. Box 408, Kaunakakai, HI 96748 | 0.00 |
| N. Emmett Aluli, M.D. | P.O. Box 408, Kaunakakai, HI 96748 | 0.00 |



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## EXPENDITURES OF $25 OR MORE PER PERSON PER DAY

List 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

List 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

List 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 | |

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

Signature Block

(Signature of authorized person)

3/29/08

(Date)

Name of authorized person (type or print) Janice Kalanihuia

Title of authorized person Chief Administrator