



HONOLULU ETHICS COMMISSION
 925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

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 Website: <http://www.honolulu.gov/ethics/>

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HONOLULU
 ETHICS COMMISSION
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2019 ANNUAL REPORT

Lobbyist Annual Report
 (January 1 – December 31, 2019)
 (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle) Coppa, Bruce		
LOBBYIST FIRM/EMPLOYER (if applicable) Capitol Consultants of Hawaii, LLP		TELEPHONE (808) 531-4551
MAILING ADDRESS (No. and Street or P.O. Box) 222 South Vineyard Street, Suite 401		FAX (808) 531-4551
		EMAIL Bruce.Coppa@808cch.com
(City) Honolulu	(State) HI	(Zip Code) 96813

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) Kamehameha Schools		TELEPHONE (808) 523-6348
MAILING ADDRESS (No. and Street or P.O. Box) 567 S. King Street, Suite 400		FAX
		EMAIL kaburges@ksbe.edu
(City) Honolulu	(State) HI	(Zip Code) 96813

PART III EXPENDITURES, BY TYPE			
Political Contributions	Amount	Receptions, Meals, Food & Beverages	Amount
Preparation & Distribution of Lobbying Materials	Amount	Media Advertising	Amount
Entertainment & Events	Amount	Other <input type="checkbox"/> Additional Sheet(s) Attached	
		TOTAL -NA-	

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING

Fees	Amount
Compensation	Amount \$3,999.57
Contributions	Amount
Membership Fees	Amount
<input type="checkbox"/> Check here if additional sheets attached	<input type="checkbox"/> n/a

PART V DESCRIPTION OF SUBJECTS ON WHICH YOU LOBBIED

<input type="checkbox"/> Business & Economic Development	<input type="checkbox"/> Community Services	<input type="checkbox"/> Customer Services
<input type="checkbox"/> Culture & Arts	<input type="checkbox"/> Housing	<input type="checkbox"/> Public Works, Infrastructure & Sustainability
<input type="checkbox"/> Parks & Recreation	<input type="checkbox"/> Public Health, Safety & Welfare	<input type="checkbox"/> Tourism
<input type="checkbox"/> Transportation	<input checked="" type="checkbox"/> Zoning & Planning	<input type="checkbox"/> Specific Legislation: <input type="checkbox"/> Additional Sheet(s) Attached Bill No. _____ (Year) _____ Reso No. _____ Admin. Rule No. _____ Dept. _____
<input checked="" type="checkbox"/> Other (indicate below): Reses 17-71, 17-73, 17-108, 18-92 Delete per Melody Dancannay telcon 3-4-2020		

PART VI POLICY MAKING PROCESS DECISIONS YOU SOUGHT TO INFLUENCE AND OUTCOME (e.g., Bill X (2019), passed)

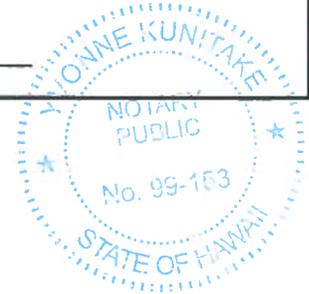
1.	Outcome:	4.	Outcome:
2.	Outcome:	5.	Outcome:
3.	Outcome:	<input type="checkbox"/> Additional Sheet(s) Attached	

PART VII LOBBYIST CERTIFICATION

I hereby certify that the foregoing statements are true and correct.  LOBBYIST SIGNATURE 1/31/2020 DATE	Subscribed and sworn to before me This <u> </u> day of <u> JAN 31 </u> 2020, By: <u>Yvonne Kunitake</u>  NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS My commission expires: <u>04/11/2023</u>
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 Rev. 12/2019
 Notary Name: Yvonne Kunitake First Circuit
 Doc. Description: 2019 Annual Report

Deadline: January 10th of Each Year
 NOTE: This is a public document



Yvonne Kunitake JAN 31 2020
 Date