



**HONOLULU ETHICS COMMISSION**  
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 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) Moy, Alicia Ellen			
LOBBYIST FIRM/EMPLOYER (if applicable) Hawaii Gas		TELEPHONE 808-535-4700	
MAILING ADDRESS (No. and Street or P.O. Box) P.O. BOX 3000		FAX 808-534-5943	
		EMAIL amoy@hawaiigas.com	
(City) Honolulu	(State) Hawaii	(Zip Code) 96802	

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) Hawaii Gas		TELEPHONE 808-535-5900	
MAILING ADDRESS (No. and Street or P.O. Box) P.O. BOX 3000		FAX 808-534-5943	
		EMAIL	
(City) Honolulu	(State) Hawaii	(Zip Code) 96802	

PART III EXPENDITURES, BY TYPE			
Political Contributions	Amount 0	Receptions, Meals, Food & Beverages	Amount 0
Preparation & Distribution of Lobbying Materials	Amount 0	Media Advertising	Amount 0
Entertainment & Events	Amount 0	Other <input type="checkbox"/> Additional Sheet(s) Attached	
		TOTAL 0	

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

Fees	Amount 0
Compensation	Amount \$400.00
Contributions	Amount 0
Membership Fees	Amount 0
<input type="checkbox"/> Check here if additional sheets attached	<input checked="" 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. <u>25</u> (Year) <u>2019</u> Reso No. _____ Admin. Rule No. _____ Dept. _____
<input type="checkbox"/> Other (indicate below):		

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

1. Bill 25 (2019)	Outcome: open	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  <u>1/10/20</u> DATE	Subscribed and sworn to before me  This <u>10</u> day of <u>January</u> , 2020.  By: <u>Liana Vossen</u> NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS  My commission expires: <b>SEP 23 2022</b>
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