



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

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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) ORMAN, LINDSAY E.			
LOBBYIST FIRM/EMPLOYER (if applicable) STARN O'TOOLE MARCUS & FISHER		TELEPHONE (808) 537-6100	
MAILING ADDRESS (No. and Street or P.O. Box) 733 BISHOP STREET, SUITE 1900		FAX (808) 537-5434	
		EMAIL lorman@starnlaw.com	
(City) HONOLULU	(State) HAWAII	(Zip Code) 96813	

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) HILTON		TELEPHONE (703) 883-1000	
MAILING ADDRESS (No. and Street or P.O. Box) 7930 JONES BRANCH DRIVE		FAX	
		EMAIL	
(City) MCLEAN	(State) VIRGINIA	(Zip Code) 22102	

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 \$ 22,275.39
Compensation	Amount 0
Contributions	Amount 0
Membership Fees	Amount 0
<input type="checkbox"/> Check here if additional sheets attached	<input type="checkbox"/> n/a

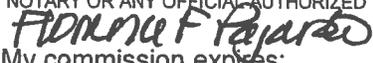
PART V DESCRIPTION OF SUBJECTS ON WHICH YOU LOBBIED

<input checked="" type="checkbox"/> Business & Economic Development	<input type="checkbox"/> Community Services	<input type="checkbox"/> Customer Services
<input type="checkbox"/> Culture & Arts	<input checked="" type="checkbox"/> Housing	<input type="checkbox"/> Public Works, Infrastructure & Sustainability
<input type="checkbox"/> Parks & Recreation	<input type="checkbox"/> Public Health, Safety & Welfare	<input checked="" 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 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 89 (2018)	Outcome: PASSED	4.	Outcome:
2. BILL 85 (2018)	Outcome: DEEMED LOST PER RCH SECT. 3-203.1	5.	Outcome:
3.	Outcome:	<input type="checkbox"/> Additional Sheet(s) Attached	

PART VII LOBBYIST CERTIFICATION

<p><i>I hereby certify that the foregoing statements are true and correct.</i></p> <p> LOBBYIST SIGNATURE</p> <p>1/24/2020 DATE</p>	<p>Subscribed and sworn to before me</p> <p>This <u>24</u> day of <u>January</u>, <u>2020</u>.</p> <p>By  LS</p> <p>NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS  My commission expires: <u>6/12/2022</u></p>
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NOTARY CERTIFICATION STATEMENT

Doc. Date: 1/24/20 Undated at time of notarization

Document Description: Honolulu Ethics Commission – 2019
Annual Report (Lindsay E. Orman)

No. of Pages: 3

Jurisdiction: First Judicial Circuit
Honolulu, Hawaii

Flora F Papaleo

1/24/20

LS

Signature of Notary

Date of Notarization and
Certification Statement

Flora F Papaleo

my commission expires

(Official Stamp or Seal)

Printed Name of Notary

6/12/2022