



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

**FORM ORG**

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

HAWAII STATE ETHICS COMMISSION  
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STATE OF HAWAII  
STATE ETHICS COMMISSION

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For lobbying reporting period: <input type="checkbox"/> January 1 - last day of February <input type="checkbox"/> March 1 - April 30 <input checked="" type="checkbox"/> May 1 - December 31 Year of Report 20 <u>11</u>	Contact person <u>Kevin C. O'Rourke</u> Phone <u>510-628-4583</u> Organization <u>Matson Navigation Company</u> Mailing Address <u>555 12th Street 8th Floor</u> <u>Oakland, CA 94607</u>
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### 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		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		11. Other disbursements	
6. Fees (other than to lobbyists)		<b>TOTAL EXPENDITURES</b>	<b>\$0.00</b>

#### 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

**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:

- |   |   |   |   |
|---|---|---|---|
| <input type="checkbox"/> Agriculture                              | <input type="checkbox"/> Education                      | <input type="checkbox"/> Human Services                                     | <input type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities        | <input type="checkbox"/> Government Operation & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation                       |
| <input type="checkbox"/> Consumer Protection & Commerce           | <input type="checkbox"/> Hawaiian Affairs               | <input type="checkbox"/> Labor & Employment                                 | <input type="checkbox"/> Transportation                             |
| <input type="checkbox"/> Culture, Arts, Historic Preservation     | <input type="checkbox"/> Health                         | <input type="checkbox"/> Planning, Land & Water Use Management              | <input checked="" type="checkbox"/> Other: (indicate below)         |
| <input type="checkbox"/> Ecology, Energy Environmental Protection | <input type="checkbox"/> Housing                        | <input type="checkbox"/> Public Safety & Corrections                        | <u>none</u>   |

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

**Signature Block**

(Signature of authorized person)

11/25/12  
(Date)

Name of authorized person (type or print) Kevin C. O'Rourke

Title of authorized person Senior Vice President