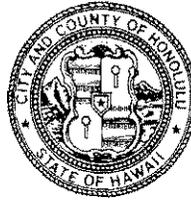


DEPARTMENT OF COMMUNITY SERVICES  
CITY AND COUNTY OF HONOLULU

715 SOUTH KING STREET, SUITE 311 • HONOLULU, HAWAII 96813 • AREA CODE 808 • PHONE: 768-7762 • FAX: 768-7792



MUFI HANNEMANN  
MAYOR

DEBORAH KIM MORIKAWA  
ACTING DIRECTOR

ERNEST Y. MARTIN  
DEPUTY DIRECTOR

February 19, 2009

The Honorable Todd Apo, Chair  
and Members  
Honolulu City Council  
530 South King Street, Room 202  
Honolulu, Hawaii 96813

RECEIVED

FEB 20 3 32 PM '09

CITY CLERK  
HONOLULU, HAWAII

Dear Chair Apo and Councilmembers:

Subject: Report of Gifts Valued in the Aggregate in Excess of \$2,500 and Requested Acceptance

We respectfully request the acceptance by the Council on behalf of the City and County of Honolulu of gifts to the City for the Mayor's 43<sup>rd</sup> Annual Senior Recognition Program valued in the aggregate in excess of \$2,500 under the provisions of Resolution No. 05-349, CD1, FD1. A proposed resolution accepting the gifts is attached for the Council's favorable consideration. The Department of Community Services has taken custody of the gifts. The recommendation of the Acting Managing Director for acceptance of the gifts is evidenced by his signature below.

The gift includes:

<u>Donation &amp; Estimated Value</u>	<u>Donor</u>
Monetary donation of \$5,000.00 and gift bags valued at \$1,188.00	Hawaii Medical Service Association
Monetary donation of \$5,000.00 and various gift items valued at \$1,000.00	First Hawaiian Bank
Monetary donation of \$1,000.00	Hawaii Government Employees Association
Monetary donation of \$300.00	Helen Dias-Kapuras Hu

The Honorable Todd Apo, Chair  
and Members

Page 2

<u>Donation &amp; Estimated Value</u>	<u>Donor</u>
Monetary donation of \$250.00	Mutual Benefit Association of Hawaii
Monetary donation of \$100.00	Hawaii National Bank
Monetary donation of \$50.00	Gerald Sumida
Monetary donation of \$50.00	Lot Lau
Two \$50.00 gift certificates; total value \$100.00	Henry Loui's Restaurant
Gift certificate for two to Plumeria Beach House valued \$96.00	The Kahala Hotel and Resort
Three \$10.00 gift certificates; total value \$30.00	Kim Chee II Restaurant
Gift certificate valued at \$100.00	Roy's Waikiki Restaurant
Three \$25.00 gift certificates; total value \$75.00	Sorabol Korean Restaurant
Gift certificate valued at \$50.00	Duke's Waikiki Restaurant
Gift certificate valued at \$50.00	Sabrina's Restaurant
Gift certificate valued at \$70.00	Soul de Cuba Cafe
Gift certificate valued at \$75.00	The Willows Restaurant
Gift certificate to Oceanarium valued \$74.00 and gift certificate to Pagoda Restaurant valued at \$56.00; total value \$130.00	HTH Corporation
One gift certificate for an Ali'i Kai Catamaran dinner cruise for two valued at \$138.00 and one gift certificate for two to the Magic of Polynesia show valued at \$105.00; total value \$243.00	Roberts Hawaii

The Honorable Todd Apo, Chair  
and Members

Page 3

<u>Donation &amp; Estimated Value</u>	<u>Donor</u>
Gift certificate valued at \$25.00	Star Markets
Two \$50.00 gift certificates; total value \$100.00	Dave & Buster's of Honolulu
Five \$20.00 gift certificates; total value \$100.00	The Mandalay Restaurant
Two \$50.00 gift cards; total value \$100.00	WalMart Honolulu Store #3478
Two whale watch or Hawaiian Cultural cruise valued at \$33.71; total value \$67.42	Paradise Cruise, Ltd.
100 "Be Our Guest" coupons; total value \$350.00	McDonald's Restaurants of Hawaii, Inc.
Six Burger King sandwich coupons and six KFC 2-piece meal coupons; total value \$36.00	Kazi Foods Burger King and KFC Hawaii
Gift certificate valued at \$20.00	Gyotaku Japanese Restaurant
100 bags, pens, key chain lights valued at \$300.00	ING Financial Advisers
Two gift certificates for two nights penthouse accommodations with two buffet breakfasts valued at \$960.00	Miramar at Waikiki
100 magnifier cards valued at \$40.00	Royal State Insurance Agency
Three \$300.00 travel gift certificates total value \$900.00	Hawaii Superferry
One "Live the Best Life Possible" gift basket valued at \$50.00	15 Craigside

The Honorable Todd Apo, Chair  
and Members

Page 4

Please feel free to speak with Karen Miyake at 768-7708 if you have any questions regarding this report.

Sincerely,

  
Deborah Kim Morikawa  
Acting Director

DKM:mf

Attachments

APPROVED:

  
Kirk W. Caldwell  
Acting Managing Director



## RESOLUTION

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RELATING TO THE ACCEPTANCE OF VARIOUS CONTRIBUTIONS AS A GIFT TO THE CITY FOR THE MAYOR'S 43<sup>rd</sup> SENIOR RECOGNITION PROGRAM, APRIL 2, 2009.

WHEREAS, Section 13-113 of the Revised Charter of the City and County of Honolulu provides for the acceptance of gifts to the City by the Council of the City and County of Honolulu; and

WHEREAS, Resolution No. 05-349, CD1, FD1, establishes a policy of the Council for the solicitation and acceptance of gifts donated to the City executive agencies; and

WHEREAS, the policy provides for acceptance of the gift by affirmative action by the Council; and

WHEREAS, through a letter, the Department of Community Services (hereinafter DCS) submitted a request for acceptance of gifts to the Council totaling \$18,005.42 for the Mayor's 43<sup>rd</sup> Senior Recognition Program which shall be held on April 2, 2009; and

WHEREAS, the Acting Managing Director has recommended acceptance of these gifts; and

WHEREAS, the description and value of the gifts are set forth in the Declaration of Gifts (Exhibit A) and attached hereto; and

BE IT RESOLVED by the Council of the City and County of Honolulu that this body accept the contributions from various donors as set forth in Exhibit A; and



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**RESOLUTION**

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BE IT FINALLY RESOLVED that the Clerk is directed to transmit a certified copy of this Resolution to the Acting Director of the Department of Community Services.

INTRODUCED BY:

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DATE OF INTRODUCTION:

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\_\_\_\_\_  
Honolulu, Hawaii

\_\_\_\_\_  
Councilmembers

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DCS/AD-174

174

City and County of Honolulu

09 JAN 20 10:02

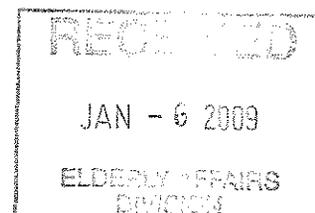
DECLARATION OF GIFT (This form must be signed and accompany your donation)	
NAME OF DONOR	Mr. Cliff Cisco, Senior Vice President Hawaii Medical Service Association
DONOR'S ADDRESS	Post Office Box 860 Honolulu, Hawaii 96808-0860
DONOR'S TELEPHONE	(808) 948-5481
STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE I do hereby absolutely and without condition or reservation give, grant and convey the donation described below to the City and County of Honolulu.	
DESCRIPTION OF GIFT	VALUE
<p>Monetary Donation *5000 / Akamai Living Bags (100) *(donation)</p> <p>For the Mayor's Senior Recognition Program honoring senior citizens' volunteer service in the community.</p> <ul style="list-style-type: none"> <li>• Monetary Donation</li> <li>• Akamai Living Bags (100)</li> </ul>	<p>Actual (if available) or Estimated</p> <p>\$ 5000.00</p> <p>\$ 1188.00</p>
Signature: <i>Cliff Cisco</i>	Date: 1/16/09
Print Name: CLIFF CISCO	Title: SENIOR VICE PRESIDENT

\* The City is unable to accept gifts after February 4, 2009

RECEIVED  
JAN 20 2009  
ELDERLY AFFAIRS  
DIVISION

## City and County of Honolulu

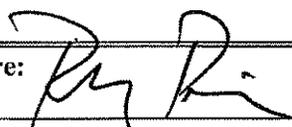
DECLARATION OF GIFT	
NAME OF DONOR	First Hawaiian Bank
DONOR'S ADDRESS	999 Bishop Street, 10 <sup>th</sup> Floor Honolulu, Hawaii 96813
DONOR'S TELEPHONE	(808) 525-7714
STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE	
I do hereby absolutely and without condition or reservation give, grant and convey the donation described below to the City and County of Honolulu.	
DESCRIPTION OF GIFT	VALUE
Cash in the amount of \$5,000.00, and donation of various giveaway gift items to be used for the Mayor's Senior Recognition Program April 02, 2009 honoring senior citizen volunteers at the Hawaii Convention Center.	Actual (if available) or Estimated  <b>\$6,000.00</b>
Signature: 	Date: 12/18/08
Print Name: Ed Char	Title: Vice President Deposit Product Department



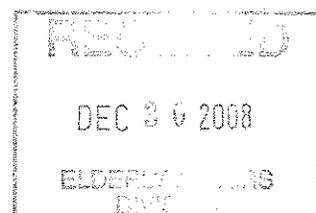
## City and County of Honolulu

## DECLARATION OF GIFT

(This form must be signed and accompany your donation)

<b>NAME OF DONOR</b>		Mr. Randy Perreira, Executive Director Hawaii Government Employees Association
<b>DONOR'S ADDRESS</b>		888 Mililani Street, Suite 601 Honolulu, Hawaii 96813
<b>DONOR'S TELEPHONE</b>		
<b>STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE</b>		
I do hereby absolutely and without condition or reservation give, grant and convey the donation described below to the City and County of Honolulu.		
<b>DESCRIPTION OF GIFT</b>		<b>VALUE</b>
<p>\$1,000 Check</p> <hr/> <p>*(donation)</p> <p>For the Mayor's Senior Recognition Program honoring senior citizens' volunteer service in the community.</p>		<p>Actual (if available) or Estimated</p>
<b>Signature:</b> 		<b>Date:</b> December 29, 2008
<b>Print Name:</b> Randy Perreira		<b>Title:</b> Executive Director

\* The City is unable to accept gifts after February 4, 2009



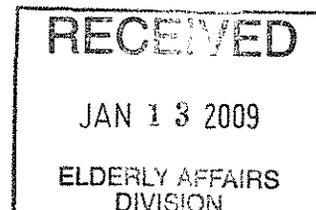
## City and County of Honolulu

## DECLARATION OF GIFT

(This form must be signed and accompany your donation)

<b>NAME OF DONOR</b>	Mrs. Helen Dias-Kapuras Hu
<b>DONOR'S ADDRESS</b>	3565 Pinao Street Honolulu, Hawaii 96822
<b>DONOR'S TELEPHONE</b>	
<b>STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE</b>	
I do hereby absolutely and without condition or reservation give, grant and convey the donation described below to the City and County of Honolulu.	
<b>DESCRIPTION OF GIFT</b>	<b>VALUE</b>
<p><i>\$300.<sup>00</sup></i></p> <p>*(donation)</p> <p>For the Mayor's Senior Recognition Program honoring senior citizens' volunteer service in the community.</p>	<p>Actual (if available) or Estimated</p>
<b>Signature:</b> <i>[Signature]</i>	<b>Date:</b> <i>1-12-09</i>
<b>Print Name:</b> <i>Helen Dias-Kapuras Hu</i>	<b>Title:</b> <i>Retired</i>

\* The City is unable to accept gifts after February 4, 2009

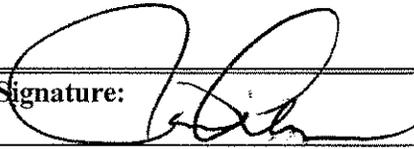


## City and County of Honolulu

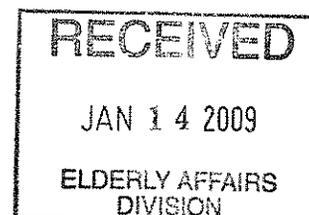
DECLARATION OF GIFT	
(This form must be signed and accompany your donation)	
<i>Douglas K. Murata</i>	
NAME OF DONOR	Mr. Melvin Higa, President & CEO <i>000</i> Mutual Benefit Association of Hawaii.
DONOR'S ADDRESS	819 South Beretania Street Honolulu, Hawaii 96813
DONOR'S TELEPHONE	
STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE	
I do hereby absolutely and without condition or reservation give, grant and convey the donation described below to the City and County of Honolulu.	
DESCRIPTION OF GIFT	VALUE
<i>250,00</i> *(donation)  For the Mayor's Senior Recognition Program honoring senior citizens' volunteer service in the community.	Actual (if available) or Estimated
Signature: <i>Douglas K. Murata</i>	Date: <i>12/24/08</i>
Print Name: <i>DOUGLAS K. MURATA</i>	Title: <i>CHIEF OPERATIONS OFFICER</i>

\* The City is unable to accept gifts after February 4, 2009

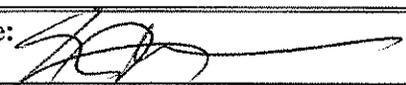
## City and County of Honolulu

<b>DECLARATION OF GIFT</b>	
(This form must be signed and accompany your donation)	
<b>NAME OF DONOR</b>	Mr. Warren K.K. Luke, Chairman & CEO Hawaii National Bank
<b>DONOR'S ADDRESS</b>	45 North King Street Honolulu, Hawaii 96817
<b>DONOR'S TELEPHONE</b>	(808) 528-7711
<b>STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE</b>	
I do hereby absolutely and without condition or reservation give, grant and convey the donation described below to the City and County of Honolulu.	
DESCRIPTION OF GIFT	VALUE
<p style="text-align: center;">Check for \$100.00</p> <hr/> <p>*(donation)</p> <p>For the Mayor's Senior Recognition Program honoring senior citizens' volunteer service in the community.</p>	<p><b>Actual (if available) or Estimated</b></p> <p>\$100.00</p>
<b>Signature:</b> 	<b>Date:</b> JAN 12 2009
<b>Print Name:</b> Warren K. K. Luke	<b>Title:</b> Chairman and CEO

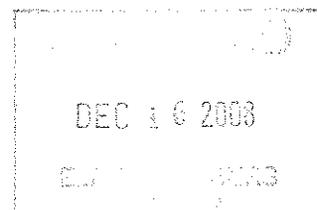
\* The City is unable to accept gifts after February 4, 2009



## City and County of Honolulu

DECLARATION OF GIFT	
(This form must be signed and accompany your donation)	
<b>NAME OF DONOR</b>	Mr. Gerald Sumida
<b>DONOR'S ADDRESS</b>	3515 Ala Hapuu Street Honolulu, Hawaii 96818-2213
<b>DONOR'S TELEPHONE</b>	
<b>STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE</b>	
I do hereby absolutely and without condition or reservation give, grant and convey the donation described below to the City and County of Honolulu.	
DESCRIPTION OF GIFT	VALUE
<p style="text-align: center;"><i>check</i></p> <hr/> <p>*(donation)</p> <p>For the Mayor's Senior Recognition Program honoring senior citizens' volunteer service in the community.</p>	<p>Actual (if available) or Estimated</p> <p><i>\$ 50<sup>00</sup></i></p>
<b>Signature:</b> 	<b>Date:</b> <i>12/14/08</i>
<b>Print Name:</b> <i>GERALD K SUMIDA</i>	<b>Title:</b>

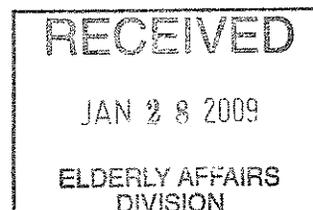
\* The City is unable to accept gifts after February 4, 2009



## City and County of Honolulu

DECLARATION OF GIFT	
(This form must be signed and accompany your donation)	
NAME OF DONOR	Mr. Lot Lau
DONOR'S ADDRESS	4203 Sierra Drive Honolulu, Hawaii 96816
DONOR'S TELEPHONE	
<b>STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE</b>	
I do hereby absolutely and without condition or reservation give, grant and convey the donation described below to the City and County of Honolulu.	
DESCRIPTION OF GIFT	VALUE
<p><i>\$50 cash donation</i></p> <p>*(donation)</p> <p>For the Mayor's Senior Recognition Program honoring senior citizens' volunteer service in the community.</p>	<p>Actual (if available) or Estimated</p> <p><i>\$50.00</i></p>
Signature: <i>Lot T. Lau</i>	Date: <i>1/25/09</i>
Print Name: <i>Lot T. Lau</i>	Title:

\* The City is unable to accept gifts after February 4, 2009

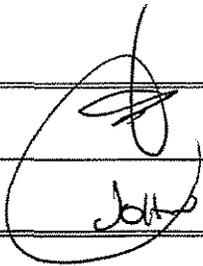


## City and County of Honolulu

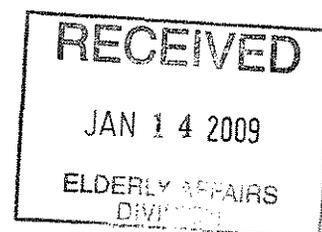
DECLARATION OF GIFT	
(This form must be signed and accompany your donation)	
<b>NAME OF DONOR</b>	Mr. Anson Kaneshiro, Owner Henry Loui's Restaurant
<b>DONOR'S ADDRESS</b>	2850 Paa Street Honolulu, Hawaii 96819
<b>DONOR'S TELEPHONE</b>	
<b>STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE</b>	
I do hereby absolutely and without condition or reservation give, grant and convey the donation described below to the City and County of Honolulu.	
DESCRIPTION OF GIFT	VALUE
<p style="font-size: 1.2em; margin: 0;">2      \$50.00      GIFT CERTIFICATES</p> <hr style="border: 0.5px solid black;"/> <p style="margin: 0;">*(donation)</p> <p style="margin: 0;">For the Mayor's Senior Recognition Program honoring senior citizens' volunteer service in the community.</p>	<p style="margin: 0;">Actual (if available) or Estimated</p> <p style="font-size: 1.5em; margin: 10px 0 0 20px;">\$100.00</p>
<b>Signature:</b> 	<b>Date:</b> 12-16-08
<b>Print Name:</b> ANSON KANESHIRO	<b>Title:</b> OWNER

\* The City is unable to accept gifts after February 4, 2009

## City and County of Honolulu

<b>DECLARATION OF GIFT</b> (This form must be signed and accompany your donation)	
<b>NAME OF DONOR</b>	Mr. John Blanco, Managing Director The Kahala Hotel & Resort
<b>DONOR'S ADDRESS</b>	5000 Kahala Avenue Honolulu, Hawaii 96816-5498
<b>DONOR'S TELEPHONE</b>	739-8888
<b>STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE</b>	
I do hereby absolutely and without condition or reservation give, grant and convey the donation described below to the City and County of Honolulu.	
DESCRIPTION OF GIFT	VALUE
Sunday Brunch Buffet for Two at Plumeria Beach House *(donation)  For the Mayor's Senior Recognition Program honoring senior citizens' volunteer service in the community.	Actual (if available) or Estimated \$96.00
<b>Signature:</b> 	<b>Date:</b> 1/8/09
<b>Print Name:</b> John Blanco	<b>Title:</b> Managing Director

\* The City is unable to accept gifts after February 4, 2009



City and County of Honolulu

DECLARATION OF GIFT

(This form must be signed and accompany your donation)

<b>NAME OF DONOR</b>	Mr. Henry Chun, Owner Kim Chee II Restaurant
<b>DONOR'S ADDRESS</b>	3569 Waiālae Avenue Honolulu, Hawaii 96816
<b>DONOR'S TELEPHONE</b>	

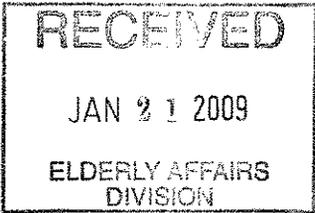
STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE

I do hereby absolutely and without condition or reservation give, grant and convey the donation described below to the City and County of Honolulu.

DESCRIPTION OF GIFT	VALUE
<p>3 \$10<sup>00</sup> Gift Certificates *(donation)</p> <p>For the Mayor's Senior Recognition Program honoring senior citizens' volunteer service in the community.</p>	<p>Actual (if available) or Estimated</p> <p>30.00</p>

<b>Signature:</b> <i>HMC</i>	<b>Date:</b> 1-20-09
<b>Print Name:</b> Henry M Chun	<b>Title:</b> OWNER

\* The City is unable to accept gifts after February 4, 2009



DCS/Admin  
3819

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City and County of Honolulu

DECLARATION OF GIFT <sup>08</sup> DEC 22 11:12	
(This form must be signed and accompany your donation)	
NAME OF DONOR	Ms. Diva Schroeder, General Manager Roy's Waikiki
DONOR'S ADDRESS	226 Lewers Street Honolulu, Hawaii 96815
DONOR'S TELEPHONE	
<b>STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE</b>	
I do hereby absolutely and without condition or reservation give, grant and convey the donation described below to the City and County of Honolulu.	
DESCRIPTION OF GIFT	VALUE
<p><u>100.00 ONE Hundred dollars</u> *(donation)</p> <p>For the Mayor's Senior Recognition Program honoring senior citizens' volunteer service in the community.</p>	<p>Actual (if available) or Estimated</p>
Signature: 	Date: 12/19/08
Print Name: Diva Schroeder	Title: MANAGER

\* The City is unable to accept gifts after February 4, 2009

DEC 29 2008  
ELDERLY SERVICES  
DIVISION

RECEIVED

DCS/Admin  
3792

City and County of Honolulu

08 DEC 18 AM 10:20

DECLARATION OF GIFT

(This form must be signed and accompany your donation)

DEPT OF COMMUNITY SERVICES

<b>NAME OF DONOR</b>	Mr. Jay Cho, Manager Sorabol Korean Restaurant
<b>DONOR'S ADDRESS</b>	805 Keeaumoku Street Honolulu, Hawaii 96814
<b>DONOR'S TELEPHONE</b>	947-6861

STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE

I do hereby absolutely and without condition or reservation give, grant and convey the donation described below to the City and County of Honolulu.

DESCRIPTION OF GIFT	VALUE
<p>3 Gift Certifications (#25<sup>00</sup>/each) *(donation)</p> <p>For the Mayor's Senior Recognition Program honoring senior citizens' volunteer service in the community.</p>	<p>Actual (if available) or Estimated</p> <p>#75<sup>00</sup></p>

<b>Signature:</b> <i>Jay Cho</i>	<b>Date:</b> 12-15-08
<b>Print Name:</b> Jay Cho	<b>Title:</b> Manager

\* The City is unable to accept gifts after February 4, 2009

RECEIVED  
DEC 19 2008  
ELDERLY CARES  
DEPT OF COMMUNITY SERVICES

**City and County of Honolulu**

DECLARATION OF GIFT (This form must be signed and accompany your donation)	
<b>NAME OF DONOR</b>	Mr. Ross Anderson, General Manager Duke's Waikiki
<b>DONOR'S ADDRESS</b>	2335 Kalakaua Avenue, Suite 116 Honolulu, Hawaii 96815
<b>DONOR'S TELEPHONE</b>	
<b>STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE</b>	
I do hereby absolutely and without condition or reservation give, grant and convey the donation described below to the City and County of Honolulu.	
DESCRIPTION OF GIFT	VALUE
*(donation)  For the Mayor's Senior Recognition Program honoring senior citizens' volunteer service in the community.	Actual (if available) or Estimated

**DUKE'S**

WAIKIKI

THIS PROMOTIONAL VOUCHER IS GOOD FOR Fifty dollars \$50.<sup>00</sup> VALUE

LOGO SPORTSWEAR NOT INCLUDED. NO CASH VALUE. GRATUITY NOT INCLUDED.

ISSUED TO: Honolulu Committee on Aging EVENT: Mayor's Annual Senior Recognition Program

**P 2866**

PROMO VOUCHER NO.

*Kat J*

MANAGER

PROMO VOUCHER VOID SIX MONTHS AFTER DATE OF ISSUE. ISSUE DATE 4-11-09

**RESTAURANT AND BAREFOOT BAR**

2335 KALAKAUA AVENUE, SUITE 116, HONOLULU, HI 96815 • (808) 922-2268 • FAX (808) 923-4204

VALIDATED PARKING AVAILABLE AT THE OHANA EAST PARKING (LOCATED ON KUHIO AVENUE).

**RESERVATIONS ARE RECOMMENDED**

## City and County of Honolulu

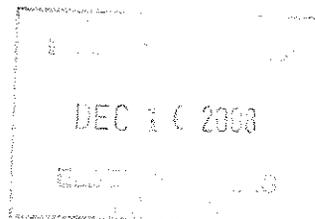
DECLARATION OF GIFT (This form must be signed and accompany your donation)	
NAME OF DONOR	Ms. Sabrina Collo, Owner Sabrina's Restaurant
DONOR'S ADDRESS	3036 Waiālae Avenue Honolulu, Hawaii 96816
DONOR'S TELEPHONE	
STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE	
I do hereby absolutely and without condition or reservation give, grant and convey the donation described below to the City and County of Honolulu.	
DESCRIPTION OF GIFT	VALUE
GIFT CERTIFICATE \$ 50 <sup>00</sup> *(donation)  For the Mayor's Senior Recognition Program honoring senior citizens' volunteer service in the community.	Actual (if available) or Estimated
Signature: <i>Sabrina Collo</i>	Date: <i>12.23.08</i>
Print Name: <i>SABRINA Collo</i>	Title: <i>OWNER</i>

\* The City is unable to accept gifts after February 4, 2009

**City and County of Honolulu**

<b>DECLARATION OF GIFT</b> (This form must be signed and accompany your donation)	
<b>NAME OF DONOR</b>	Mr. Michael Iamele, General Manager Soul de Cuba Café
<b>DONOR'S ADDRESS</b>	1121 Bethel Street Honolulu, Hawaii 96813
<b>DONOR'S TELEPHONE</b>	808 545 2822
<b>STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE</b>	
I do hereby absolutely and without condition or reservation give, grant and convey the donation described below to the City and County of Honolulu.	
<b>DESCRIPTION OF GIFT</b>	<b>VALUE</b>
DINNER FOR TWO AT SOUL DE CUBA CAFE CUBAN CUISINE & MORE <hr/> *(donation) For the Mayor's Senior Recognition Program honoring senior citizens' volunteer service in the community.	Actual (if available) or Estimated  \$70 <sup>00</sup>
<b>Signature:</b> <i>Michael Iamele</i>	<b>Date:</b> 12 / 13 / 08
<b>Print Name:</b> MICHAEL IAMELE	<b>Title:</b> GM

\* The City is unable to accept gifts after February 4, 2009



City and County of Honolulu

DECLARATION OF GIFT

(This form must be signed and accompany your donation)

<b>NAME OF DONOR</b>	Ms. Kimberly Izumoto, Manager The Willows
<b>DONOR'S ADDRESS</b>	901 Hausten Street Honolulu, Hawaii 96826
<b>DONOR'S TELEPHONE</b>	

**STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE**  
 I do hereby absolutely and without condition or reservation give, grant and convey the donation described below to the City and County of Honolulu.

DESCRIPTION OF GIFT	VALUE
<p><i>Dinner Buffet Gift Certificate for Two.</i>            *(donation)</p> <p>For the Mayor's Senior Recognition Program honoring senior citizens' volunteer service in the community.</p>	<p>Actual (if available) or Estimated</p> <p><i>\$ 15.00.</i></p>

<b>Signature:</b> <i>Kim Izumoto</i>	<b>Date:</b> <i>12-24-2008</i>
<b>Print Name:</b> <i>Kim Izumoto</i>	<b>Title:</b> <i>manager</i>

\* The City is unable to accept gifts after February 4, 2009

RECEIVED

City and County of Honolulu

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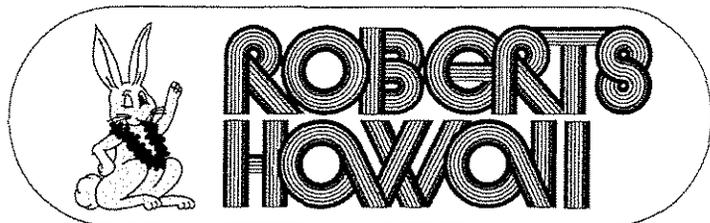
DECLARATION OF GIFT

(This form must be signed and accompany your donation)

DEPT OF COMPTROLLER

<b>NAME OF DONOR</b>		Mr. Robert Minicola, Regional Vice President HTH Corporation
<b>DONOR'S ADDRESS</b>		2490 Kalakaua Avenue Honolulu, Hawaii 96815-3240
<b>DONOR'S TELEPHONE</b>		
<b>STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE</b>		
I do hereby absolutely and without condition or reservation give, grant and convey the donation described below to the City and County of Honolulu.		
<b>DESCRIPTION OF GIFT</b>		<b>VALUE</b>
1- Buffet Dinner for Two at Oceanarium Restaurant		Actual (if available) or
1- Dinner buffet for Two at Pagoda Floating Restaurant		Estimated
*(donation)		\$ 74 <sup>00</sup>
For the Mayor's Senior Recognition Program honoring senior citizens' volunteer service in the community.		\$ 56 <sup>00</sup>
		<u>Total \$ 130<sup>00</sup></u>
<b>Signature:</b> <i>Robert Minicola</i>		<b>Date:</b> December 16, 2008
<b>Print Name:</b> Robert Minicola		<b>Title:</b> Regional Vice president of operation

\* The City is unable to accept gifts after February 4, 2009



April 11, 2009

## GIFT CERTIFICATE

### ***Congratulations!!!***

In conjunction with the **Honolulu Committee on Aging "Mayors Annual Senior Recognition Program"**, we are pleased to present to you this gift certificate for a Main Deck Dinner Cruise for two (2) people aboard the Ali'i Kai Catamaran.

Please call (808) 539-9400 at least 48 hours in advance to make your reservations. Reservations are subject to space availability and may not be available during certain holiday periods.

Upon boarding, please present this original Gift Certificate to the Cruise Director. Then get ready for lots of fun and excitement as you travel on an unforgettable 2-hour cruise complete with dancing, live entertainment and a delicious dinner buffet.

This Certificate is **valid until October 11, 2009** and extensions are not permitted. This Certificate is not redeemable for cash, in whole or in part, and is non-transferable. Other restrictions may apply.

Aloha,

**ROBERT'S HAWAII TOURS**

A handwritten signature in black ink, appearing to read "Joann Erban", is written over the printed name.

**JOANN ERBAN**

Director of Sales and Marketing

Certificate No.: AK-211-08

# MAGIC OF POLYNESIA®

## GIFT CERTIFICATE

In conjunction with the  
**HONOLULU COMMITTEE ON AGING "MAYORS ANNUAL  
SENIOR RECOGNITION PROGRAM",**  
we are pleased to present this certificate for

**Two (2) *Magic of Polynesia* Show Tickets**

A theatrical extravaganza of magic and music,  
the *Magic of Polynesia* is the Ultimate Stage Spectacular!  
Nightly performances are held at the Waikiki Beachcomber Hotel,  
starring Hawaii's internationally acclaimed illusionist John Hirokawa  
and his stunning cast of Polynesian dancers.

For reservations,  
please call (808) 971-4321 with your gift certificate number. This original  
certificate must be surrendered to the Magic Box Office  
at the Waikiki Beachcomber Hotel in exchange for your admittance  
ticket(s) on the evening of your attendance.

Seating begins at 8:00 p.m. and the show starts at 8:20 p.m.

We look forward to your visit with us soon...you won't believe your eyes!

Sincerely,



JOANN ERBAN

Director of Sales and Marketing

GC No. MOP-417-08

Date: April 11, 2009

EXPIRATION DATE: October 11, 2009

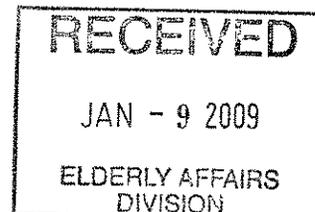
Extensions are not permitted

*Please note the following: A different illusionist may be featured on certain days;  
Seating & show times are subject to change without notice;  
This certificate is not redeemable for cash, in whole or in part, and is not transferable.*

**City and County of Honolulu**

DECLARATION OF GIFT (This form must be signed and accompany your donation)	
<b>NAME OF DONOR</b>	Mr. Karl Wissmann, President & CEO Star Markets, Ltd.
<b>DONOR'S ADDRESS</b>	Post Office Box 2367 Honolulu, Hawaii 96804-2367
<b>DONOR'S TELEPHONE</b>	
<b>STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE</b>	
I do hereby absolutely and without condition or reservation give, grant and convey the donation described below to the City and County of Honolulu.	
DESCRIPTION OF GIFT	VALUE
<p><i>#25.00 Star Markets Gift certificate</i></p> <p>*(donation)</p> <p>For the Mayor's Senior Recognition Program honoring senior citizens' volunteer service in the community.</p>	<p>Actual (if available) or Estimated</p> <p style="text-align: center;">RECEIVED JAN - 9 2009 P 2:03 DCS/Admin <u>85</u></p>
<b>Signature:</b> <i>Phyllis Masud</i>	<b>Date:</b> <i>1/6/09</i>
<b>Print Name:</b> <i>Phyllis Masud</i>	<b>Title:</b> <i>Corporate Secretary &amp; Director of Corporate Services</i>

\* The City is unable to accept gifts after February 4, 2009



City and County of Honolulu

DECLARATION OF GIFT (This form must be signed and accompany your donation)	
NAME OF DONOR	Ms. Kendra Murray, Special Events Manager Dave & Buster's of Honolulu
DONOR'S ADDRESS	1030 Auahi Street Honolulu, Hawaii 96814
DONOR'S TELEPHONE	
STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE I do hereby absolutely and without condition or reservation give, grant and convey the donation described below to the City and County of Honolulu.	
DESCRIPTION OF GIFT	VALUE
2. \$50 gold cert *(donation)  For the Mayor's Senior Recognition Program honoring senior citizens' volunteer service in the community.	Actual (if available) or Estimated \$ 100



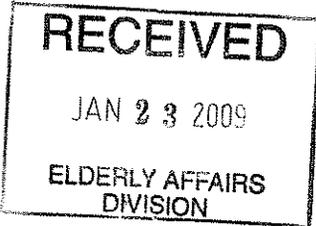
DAVE & BUSTER'S, INC.  
www.daveandbusters.com

KENDRA MURRAY  
Special Events Manager

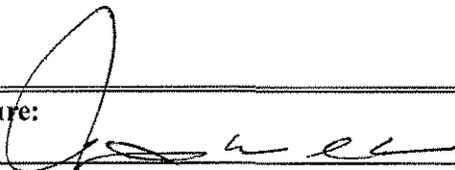
1030 Auahi Street  
Honolulu, HI 96814  
(808) 589-2215 • Direct (808) 589-5006  
Fax (808) 589-8966  
kendra\_murray@daveandbusters.com

Date:	
Title:	

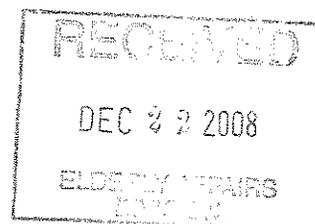
February 4, 2009



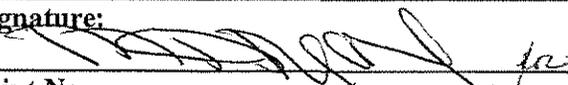
### City and County of Honolulu

DECLARATION OF GIFT	
(This form must be signed and accompany your donation)	
<b>NAME OF DONOR</b>	Mr. Lawrence Chan, Owner The Mandalay Restaurant
<b>DONOR'S ADDRESS</b>	1055 Alakea Street Honolulu, Hawaii 96813
<b>DONOR'S TELEPHONE</b>	
<b>STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE</b>	
I do hereby absolutely and without condition or reservation give, grant and convey the donation described below to the City and County of Honolulu.	
DESCRIPTION OF GIFT	VALUE
<p>5 \$20.00 Gift Certificates *(donation)</p> <p>For the Mayor's Senior Recognition Program honoring senior citizens' volunteer service in the community.</p>	<p>Actual (if available) or Estimated 100<sup>00</sup></p>
<b>Signature:</b> 	<b>Date:</b> 12/19/08
<b>Print Name:</b> Lawrence Chan	<b>Title:</b> Owner

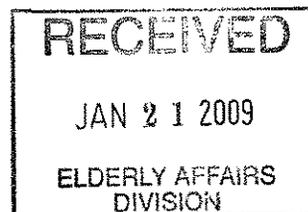
\* The City is unable to accept gifts after February 4, 2009



### City and County of Honolulu

DECLARATION OF GIFT	
(This form must be signed and accompany your donation)	
<b>NAME OF DONOR</b>	Mr. Walter Lott, Store Manager WalMart Honolulu Store # 3478
<b>DONOR'S ADDRESS</b>	700 Keeaumoku Street Honolulu, Hawaii 96814
<b>DONOR'S TELEPHONE</b>	
<b>STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE</b>	
I do hereby absolutely and without condition or reservation give, grant and convey the donation described below to the City and County of Honolulu.	
DESCRIPTION OF GIFT	VALUE
<p><u>2 \$50<sup>00</sup> Gift Certificates</u></p> <p>*(donation)</p> <p>For the Mayor's Senior Recognition Program honoring senior citizens' volunteer service in the community.</p>	<p>Actual (if available) or Estimated</p> <p>\$100-</p>
<b>Signature:</b> 	<b>Date:</b> 1.21.09
<b>Print Name:</b> Walter Lott	<b>Title:</b> Store Manager

\* The City is unable to accept gifts after February 4, 2009



PARADISE CRUISE, LTD.

# CRUISE CERTIFICATE

Certificate Number: 534

Presented to: Outstanding Senior Male and Female Volunteers of the Year

From: Star of Honolulu Cruises & Events  
Premier Whale Watch or Hawaiian  
Cultural Cruise Standard w/ no

Cruise: trans 2 pax

Valid Through: December 18, 2009

Issued By: Myra Sales

Issued Date: December 18, 2008

#### Terms and Conditions

- Redeem this gift certificate at Star of Honolulu Cruises & Events for cruise type indicated only (based on availability).
- Honor original certificate only.
- Non-refundable for cash / No cash value.
- Not valid with any other promotion/coupon.
- Reservations may be made either via phone, fax, or internet 24 hours a day.
  - Phone: (808) 983-7827 or Toll Free (800) 334-6191 (U.S./Continent)
  - Fax: (808) 983-7780
  - Internet: [www.starofhonolulu.com](http://www.starofhonolulu.com)
  - E-Mail: [info@starofhonolulu.com](mailto:info@starofhonolulu.com)

Certificate is non transferable ( ID required)



STAR  
of Honolulu

PARADISE CRUISE, LTD.



STAR  
of Honolulu

# CRUISE CERTIFICATE

Certificate Number: 535

Presented to: Outstanding Senior Male and Female Volunteers of the Year

From: Star of Honolulu Cruises & Events  
Premier Whale Watch or  
Hawaiian Cultural Cruise

Cruise: Standard w/no trans 2pax

Valid Through: December 18, 2009

Issued By: Myra Sales

Issued Date: December 18, 2008

#### Terms and Conditions

- Redeem this gift certificate at Star of Honolulu Cruises & Events for cruise type indicated only (based on availability).
- Honor original certificate only.
- Non-refundable for cash / No cash value.
- Not valid with any other promotion/coupon.
- Reservations may be made either via phone, fax, or internet 24 hours a day.
  - Phone: (808) 983-7827 or Toll Free (800) 334-6191 (U.S./Continent)
  - Fax: (808) 983-7780
  - Internet: [www.starofhonolulu.com](http://www.starofhonolulu.com)
  - E-Mail: [info@starofhonolulu.com](mailto:info@starofhonolulu.com)

Certificate is non transferable ( ID required)



# McDonald's® Restaurants of Hawaii, Inc.

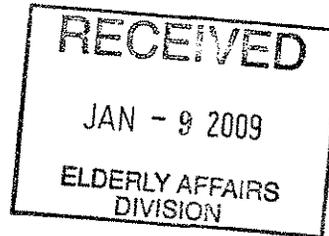
1132 Bishop Street ♦ Suite 2000 ♦ Honolulu, Hawaii 96813-2807  
Telephone: (808) 585-8570 Fax: (808) 532-1582

RECEIVED  
JAN - 9 2009  
DEPT OF CON  
SERVICE

DCS/Admin

86

January 8, 2009



Department of Human Services  
City & County of Honolulu  
Attn: Joan Naguwa  
715 S. King St., Suite 311  
Honolulu, HI 96813

Re: Mayor's Annual Senior Recognition Program

Dear Joan Naguwa,

Thank you for writing McDonald's regarding your donation request. Enclosed are "100 Be Our Guest" coupons that McDonald's of Hawaii is pleased to provide for your organization.

Our best wishes for a successful event.

*Received 100 coupons estimated  
value \$350 = \$350.00  
1/9/09*

Sincerely,  
The Donations Committee

Encl

**One FREE  
Premium Chicken  
Sandwich**



Served after 10:30 a.m.

**i'm lovin' it®**

Redeemable Only At:

**McDonald's®  
of Hawaii**

When you present this coupon at the listed  
McDonald's® with our compliments.

By: JUN 30 2009 **McDONALD'S OF HI**

Owner/Operator: For reimbursement send to: McDonald's of Hawaii, 1132 Bishop St., #2000, Honolulu, HI 96813.  
Restaurant: For redemption, verify color-changing gold security Arch above.  
Current prices and participation based on independent operator decision. Prices may vary. Plus tax if applicable. Limit one coupon per  
customer per visit. One free item per coupon. Not valid in conjunction with any other offer, discount, coupon or combo meal. Cash value 1/20  
of one cent. Present coupon before ordering. Coupon may not be transferred, copied or duplicated in any way or transmitted via electronic  
media. Valid when product served. May not be valid for custom orders. © 2007 McDonald's YDX



### City and County of Honolulu

#### DECLARATION OF GIFT

(This form must be signed and accompany your donation)

<b>NAME OF DONOR</b>	Mr. Steve Johnson, General Manager Kazi Foods Burger King and KFC-Hawaii
<b>DONOR'S ADDRESS</b>	560 N. Nimitz Highway, #214 Honolulu, Hawaii 96817
<b>DONOR'S TELEPHONE</b>	

**STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE**

I do hereby absolutely and without condition or reservation give, grant and convey the donation described below to the City and County of Honolulu.

DESCRIPTION OF GIFT	VALUE
Burger King 6 Whopper Value meals KFC 6 2pc. meals	Actual (if available) or Estimated
*(donation)	
For the Mayor's Senior Recognition Program honoring senior citizens' volunteer service in the community.	



**Complimentary  
2 Pc. Meal**

1630

(2 pieces of chicken thigh/leg combo, small mash/gravy, small coleslaw, and biscuit)

Present card when ordering. No substitutions please. Good at any KFC restaurant in Hawaii except at KFC-Kaheka. Not good with any other special offers. No reproduction accepted.

CPN8

APR 30 2009

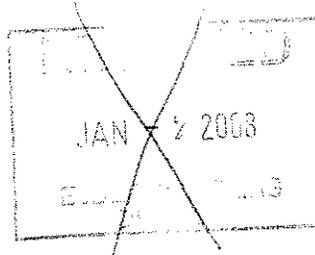
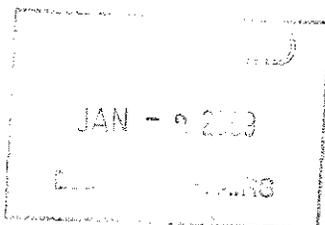
Expires

*[Handwritten Signature]*  
Authorized Signature



<b>Signature:</b>	<b>Date:</b>
<b>Print Name:</b>	<b>Title:</b>

\* The City is unable to accept gifts after February 4, 2009



City and County of Honolulu

DCS/Adm

206

DECLARATION OF GIFT (This form must be signed and accompany your donation)	
NAME OF DONOR	Mr. Thomas H. Jones, President REI Food Service, LLC d/b/a Gyotaku Japanese Restaurant
DONOR'S ADDRESS	1824 South King Street Honolulu, Hawaii 96826
DONOR'S TELEPHONE	
STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE	
I do hereby absolutely and without condition or reservation give, grant and convey the donation described below to the City and County of Honolulu.	
DESCRIPTION OF GIFT	VALUE
Gift Certificate - *(donation)  For the Mayor's Senior Recognition Program honoring senior citizens' volunteer service in the community.	Actual (if available) or Estimated \$20.00
Signature: Michelle D Egami	Date: 1/16/09
Print Name: Michelle Egami	Title: office clerk

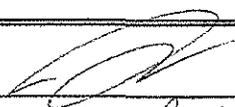
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JAN 21 2009

\* The City is unable to accept gifts after February 4, 2009

RECEIVED  
JAN 22 2009  
ELDERLY AFFAIRS  
DIVISION

City and County of Honolulu

EXHIBIT A

DECLARATION OF GIFT	
(This form must be signed and accompany your donation)	
NAME OF DONOR	ING Financial Advisers Mr. Jared Nakamoto, Financial Adviser
DONOR'S ADDRESS	711 Kapiolani Boulevard, Suite 100 Honolulu, Hawaii 96813
DONOR'S TELEPHONE	(808) 597-8213
<b>STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE</b>	
I do hereby absolutely and without condition or reservation give, grant and convey the donation described below to the City and County of Honolulu.	
DESCRIPTION OF GIFT	VALUE
<p><i>Bags, pens, <del>laptop</del> keychain, lights</i></p> <p>*(donation)</p> <p>For the Mayor's Senior Recognition Program honoring senior citizens' volunteer service in the community.</p>	<p>Actual (if available) or Estimated</p> <p><i>\$ 300.00 est</i></p>
Signature: 	Date: <i>2/2/09</i>
Print Name: <i>Jared Nakamoto</i>	Title: <i>Financial Advisor</i>

\* The City is unable to accept gifts after February 4, 2009

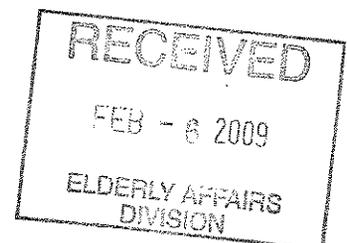
## City and County of Honolulu

## DECLARATION OF GIFT

(This form must be signed and accompany your donation)

<b>NAME OF DONOR</b>		Mr. Russell Chun, General Manager Miramar at Waikiki
<b>DONOR'S ADDRESS</b>		2345 Kuhio Avenue Honolulu, Hawaii 96815-2996
<b>DONOR'S TELEPHONE</b>		
<b>STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE</b>		
I do hereby absolutely and without condition or reservation give, grant and convey the donation described below to the City and County of Honolulu.		
<b>DESCRIPTION OF GIFT</b>		<b>VALUE</b>
<p>2 nights complimentary accommodations in a Penthouse Suite for two adults and daily breakfast for 2</p> <p>*(donation)</p> <p>For the Mayor's Senior Recognition Program honoring senior citizens' volunteer service in the community.</p>		<p>Actual (if available) or Estimated</p> <p>Approximately \$960.00</p>
<b>Signature:</b> <i>Russell Chun</i>		<b>Date:</b> 12/16/08
<b>Print Name:</b> Russell Chun		<b>Title:</b> Gen Mgr

\* The City is unable to accept gifts after February 4, 2009



**City and County of Honolulu**

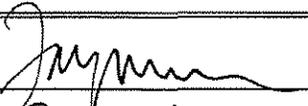
**DECLARATION OF GIFT**

(This form must be signed and accompany your donation)

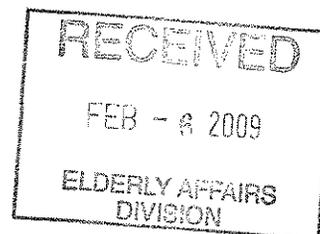
<b>NAME OF DONOR</b>	Mr. Gordon Murakami / Fay Uyema, VP. Royal State Insurance Agency
<b>DONOR'S ADDRESS</b>	819 South Beretania Street Honolulu, Hawaii 96813
<b>DONOR'S TELEPHONE</b>	539-1674

**STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE**  
 I do hereby absolutely and without condition or reservation give, grant and convey the donation described below to the City and County of Honolulu.

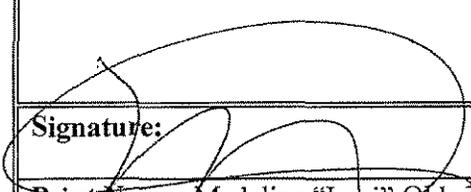
DESCRIPTION OF GIFT	VALUE Actual (if available) or Estimated
<p>(100) Magnifier Cards                      *(donation)</p> <p>For the Mayor's Senior Recognition Program honoring senior citizens' volunteer service in the community.</p>	<p>40 \$ ea. x                      100 =                      \$40</p>

<b>Signature:</b> 	<b>Date:</b> 2/4/09
<b>Print Name:</b> Fay M. Uyema	<b>Title:</b> VP

\* The City is unable to accept gifts after February 4, 2009



### City and County of Honolulu

DECLARATION OF GIFT	
(This form must be signed and accompany your donation)	
<b>NAME OF DONOR</b>	Madeline "Lani" Olds Director of Customer Experience & Community Relations Hawaii Superferry
<b>DONOR'S ADDRESS</b>	One Waterfront Plaza 500 Ala Moana Blvd., Suite 300 Honolulu, Hawaii 96813
<b>DONOR'S TELEPHONE</b>	(808) 853-4096
STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE	
I do hereby absolutely and without condition or reservation give, grant and convey the donation described below to the City and County of Honolulu.	
DESCRIPTION OF GIFT	VALUE
<p style="text-align: center;">3 Travel Certificates entitling each bearer to a roundtrip voyage for 1 person and 1 non-commercial vehicle.</p> <p>*(donation)</p> <p>For the Mayor's Senior Recognition Program honoring senior citizens' volunteer service in the community.</p>	<p style="text-align: center;"><b>Actual (if available) or Estimated</b></p> <p style="text-align: center;">\$300 each</p>
<b>Signature:</b> 	<b>Date:</b> 2/9/09
<b>Print Name:</b> Madeline "Lani" Olds	<b>Title:</b> Director of Customer Experience & Community Relations

\* The City is unable to accept gifts after February 4, 2009

## City and County of Honolulu

<b>DECLARATION OF GIFT</b>	
(This form must be signed and accompany your donation)	
<b>NAME OF DONOR</b>	15 Craigside
<b>DONOR'S ADDRESS</b>	1741 Nu'uau Avenue Honolulu, HI 96817
<b>DONOR'S TELEPHONE</b>	285-5178
<b>STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE</b>	
I do hereby absolutely and without condition or reservation give, grant and convey the donation described below to the City and County of Honolulu.	
DESCRIPTION OF GIFT	VALUE
<p>15 Craigside "Live The Best Life Possible" Gift Basket includes: Vitamin water, boost smoothie, fruit snacks, dumbbells (for exercise), sudoku &amp; crossword puzzles, tea w/ mug, and a 15 Craigside tote bag. *(donation)</p> <p>For the Mayor's Senior Recognition Program honoring senior citizens' volunteer service in the community.</p>	<p><b>Actual (if available) or Estimated</b></p> <p><b>\$50.00</b></p>
<b>Signature:</b> Lori Cristobal	<b>Date:</b> 2/9/09
<b>Print Name:</b> Lori Cristobal	<b>Title:</b> Outreach Coordinator

\* The City is unable to accept gifts after February 4, 2009