

CITY CLERK
HONOLULU, HAWAII

AUG 7 9 27 AM '09

OFFICE OF THE CITY CLERK
CITY AND COUNTY OF HONOLULU
530 SOUTH KING STREET, ROOM 100
HONOLULU, HAWAII 96813-3007
TELEPHONE: (808) 768-3810 • FAX: (808) 768-3835

BERNICE K.N. MAU
CITY CLERK

RECEIVED

AUTOMATIC ACCEPTANCE OR REJECTION OF GIFTS

Ref: D-602

DATE: August 7, 2009
TO: Lester K.C. Chang, Director
Department of Parks and Recreation
SUBJECT: Quarterly Report of Gifts Valued at \$2,500 or Less and Requested
Acceptance

Pursuant to Resolution 05-349, CD1, FD1, relating to the guidelines for the solicitation and receipt of gifts on behalf of the City and County of Honolulu, a request for an acceptance of gift (Communication D-602) was filed with the Council on July 7, 2009. As of August 6, 2009, the gift was deemed **accepted**.

BERNICE K.N. MAU
City Clerk

dc

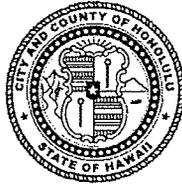
Enclosure: D-602

Acknowledgement:

TODD K. APO
Chair, Honolulu City Council

DEPARTMENT OF PARKS AND RECREATION
CITY AND COUNTY OF HONOLULU

KAPOLEI HALE • 1000 ULUOHA STREET, SUITE 309 • KAPOLEI, HAWAII 96707
TELEPHONE: (808) 768-3003 • FAX: (808) 768-7053 • INTERNET: www.honolulu.gov



MUFI HANNEMANN
MAYOR

LESTER K.C. CHANG
DIRECTOR

GAIL Y. HARAGUCHI
DEPUTY DIRECTOR

July 6, 2009

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

Dear Chair Apo and Councilmembers:

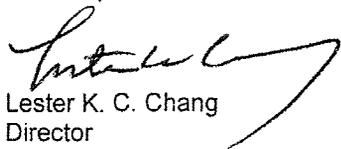
Subject: Quarterly Report of Gifts Valued at \$2,500 or Less and Requested Acceptance

This report to the City Council enumerates all gifts taken into custody by the Department of Parks and Recreation for the quarter ending June 30, 2009. This report is submitted under the provisions of Resolution 05-349, CD1, FD1. Information on each gift is set forth in the attached Exhibit A.

We respectfully request the acceptance of these gifts by the Council on behalf of the City and County of Honolulu.

Please feel free to speak with John Blewitt at 768-3011, if you have any questions regarding this report.

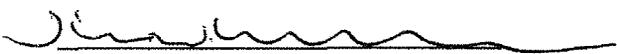
Sincerely,


Lester K. C. Chang
Director

LKCC:mk

Attachment(s)

APPROVED:


Kirk W. Caldwell
Managing Director

RECEIVED
JUL 7 11 46 AM '09
CITY CLERK
HONOLULU, HAWAII

EXHIBIT "A"

QUARTERLY REPORT OF GIFTS RECEIVED VALUED AT
\$2,500 OR LESS UNDER RESOLUTION NO. 05-349, CD1, FD1

CITY AGENCY: Department of Parks and Recreation

QUARTER ENDING: June 30, 2009

The following gifts were taken into custody by the agency in the previous quarter.

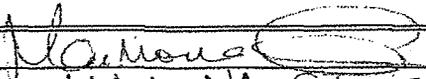
<u>Description of Gift</u>	<u>Donor's Estimated Value of Gift</u>	<u>Donor</u>
Monetary Donation Foster Botanical Garden	\$ 60.00	Ms. Valerie Southwood American Business Women's Association Aikane Chapter 3768 Kumukaa Place Honolulu, Hawaii 96822
Monetary Donation Veteran's Memorial Aquatic Center - Patsy T. Mink Central Oahu Regional Park	\$ 250.00	Ms. Maimona Ghows 719 Kanaha Street Kailua, Hawaii 96734
Monetary Donation Honolulu Botanical Garden	\$ 25.00	Ms. Jolene Cogbill, Instructor Chaminade University 3140 Waialae Avenue Honolulu, Hawaii 96816
Monetary Donation Honolulu Botanical Garden	\$ 25.00	Dr. Alan Ohta Chaminade University 3140 Waialae Avenue Honolulu, Hawaii 96816
Monetary Donation Honolulu Botanical Garden	\$ 25.00	Mr. Richard Kimitsuka Instructor Chaminade University 3140 Waialae Avenue Honolulu, Hawaii 96816

<u>Description of Gift</u>	<u>Donor's Estimated Value of Gift</u>	<u>Donor</u>
Monetary Donation Honolulu Botanical Garden	\$ 25.00	Ms. Lisa Duich Perry Chaminade University 3140 Waialae Avenue Honolulu, Hawaii 96818
Monetary Donation Foster Botanical Garden	\$ 20.00	Mr. & Mrs. Michael Kemmerer 10405 Nikelby Way Damascus, Maryland 20872
Monetary Donation Patsy T. Mink Central Oahu Regional Park	\$ 500.00	Mr. Roger Dequina Program Director 19 Sports Association Post Office Box 26080 Honolulu, Hawaii 96825
Monetary Donation Veteran's Memorial Aquatic Center – Patsy T. Mink Central Oahu Regional Park	\$ 500.00	Mr. Dwight Toyama Executive Director Oahu Interscholastic Association 4361 Salt Lake Boulevard Honolulu, Hawaii 96818
Stiga Ping Pong Table for Beretania Community Park	\$ 400.00	Mr. David Wong 2440 Date Street, Apt. 1004 Honolulu, Hawaii 96826
Ping Pong Equipment for Pupukea Beach Park	\$ 500.00	Ms. Robyn Nakasone P. O. Box 785 Aiea, Hawaii 96701
Monetary Donation Foster Botanical Garden	\$ 50.00	Ms. Jacky Jaeger Kokohead Elementary School 189 Lunalilo Home Road Honolulu, Hawaii 96825

City and County of Honolulu

DECLARATION OF GIFT	
NAME OF DONOR	American Business Aikane Chapter Women's Assn
DONOR'S ADDRESS	3768 Kumukaa Place HNL 96822
DONOR'S TELEPHONE	(808) 988-3859
STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE	
DESCRIPTION OF GIFT	VALUE
Monetary	\$60.00 Received 3/28/09 By Dawn Weston Cashier
Signature: Valerie Southwood	Date: 03/28/09
Print Name: Valerie Southwood	Title: Past Resident

City and County of Honolulu

DECLARATION OF GIFT	
NAME OF DONOR	Maimona Ghows
DONOR'S ADDRESS	719 Kanaha St., Kailua, HI
DONOR'S TELEPHONE	808 263 6433
STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE	
<p>I own the item described below and desire to give the property to the City and County of Honolulu. To carry out my purpose, I do hereby absolutely and without condition or reservation give, grant and convey the property to the City and County of Honolulu.</p>	
DESCRIPTION OF GIFT	VALUE
<p>Complete and accurate description of gift in detail. Enclose a photo if available.</p> <p>Funds are to assist with daily operation and upkeep expenses of the Veterans Memorial Aquatic Center at Central Oahu Regional Park.</p> <p style="text-align: center;"><i>\$250/- donation</i></p>	<p>Actual (if available) or Estimated</p> <p style="font-size: 1.5em;"><u>\$250.</u></p>
Signature: 	Date: 3.18.09
Print Name: MAIMONA GHOWS	Title: Parent

City and County of Honolulu

DECLARATION OF GIFT	
NAME OF DONOR	Chaminade University
DONOR'S ADDRESS	3140 Waiwala Ave 96816
DONOR'S TELEPHONE	735-4711
STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE	
<p>I own the item described below and desire to give the property to the City and County of Honolulu. To carry out my purpose, I do hereby absolutely and without condition or reservation give, grant and convey the property to the City and County of Honolulu.</p>	
DESCRIPTION OF GIFT	VALUE
<p>Complete an accurate description of gift in detail. Enclose a photo if available.</p> <p>check # 0131240</p>	<p>Actual (if available) or estimated</p> <p>\$ 25 -</p>
Signature: Jolene J. Coghill	Date: 4/23/09
Print Name: Jolene Coghill	Title: Instructor

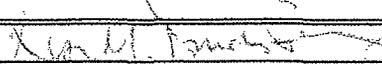
City and County of Honolulu

DECLARATION OF GIFT	
NAME OF DONOR CLARENCE UWID OF HON	
DONOR'S ADDRESS 3140 WAIANA AVE.	
DONOR'S TELEPHONE	
STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE	
<p>I own the item described below and desire to give the property to the City and County of Honolulu. To carry out my purpose, I do hereby absolutely and without condition or reservation give, grant and convey the property to the City and County of Honolulu.</p>	
DESCRIPTION OF GIFT	VALUE
<p>Complete an accurate description of gift in detail. Enclose a photo if available.</p> <p>\$ 25⁰⁰ CK # 0131239</p>	<p>Actual (if available) or estimated</p> <p>\$25⁰⁰</p>
<p>Signature: <i>Alon Ohta</i></p> <p>Print Name: Alon Ohta</p>	<p>Date: 4/22/09</p> <p>Title: DR.</p>

City and County of Honolulu

DECLARATION OF GIFT	
NAME OF DONOR	Chaminade University
DONOR'S ADDRESS	3140 Wai'alea St.
DONOR'S TELEPHONE	256-5567
STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE	
<p>I own the item described below and desire to give the property to the City and County of Honolulu. To carry out my purpose, I do hereby absolutely and without condition or reservation give, grant and convey the property to the City and County of Honolulu.</p>	
DESCRIPTION OF GIFT	VALUE
<p>Complete an accurate description of gift in detail. Enclose a photo if available.</p> <p style="text-align: center; font-size: 1.2em;">Check # 0131241</p>	<p>Actual (if available) or estimated</p> <p style="font-size: 1.2em;">25.00</p>
Signature: <i>[Signature]</i>	Date: 4/24/07
Print Name: RICHARD KIMISHIKA	Title: Treasurer

City and County of Honolulu

DECLARATION OF GIFT	
NAME OF DONOR	
DONOR'S ADDRESS	
DONOR'S TELEPHONE	
STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE	
<p>I own the item described below and desire to give the property to the City & County of Honolulu. To carry out my purpose, I do hereby absolutely and without condition or reservation give, grant and convey the property to the City & County of Honolulu.</p>	
DESCRIPTION OF GIFT	VALUE
<p>Complete an accurate description of gift in detail. Enclose a photo if available.</p> <p style="text-align: center; font-size: 1.2em;">Biology Field Trip Donation check 0131238 Chamunade University</p>	<p>Actual (if available) or estimated</p> <p style="text-align: center; font-size: 1.2em;">\$25.00</p>
Signature: 	Date: 4/21/09
Print Name: LISA M. DUCHESNE	Title: Lecturer in Biology

City and County of Honolulu

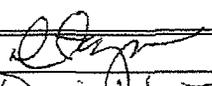
DECLARATION OF GIFT	
NAME OF DONOR	Michael + Laura Kemmerer
DONOR'S ADDRESS	10405 Nickelby Way Damascus, MD 20872
DONOR'S TELEPHONE	301-960-4813
STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE	
<p>I own the item described below and desire to give the property to the City and County of Honolulu. To carry out my purpose, I do hereby absolutely and without condition or reservation give, grant and convey the property to the City and County of Honolulu.</p>	
DESCRIPTION OF GIFT	VALUE
Cash to Foster Botanical Garden	\$20
Signature: 	Date: 5/5/09
Print Name: Michael Kemmerer	Title:

City and County of Honolulu

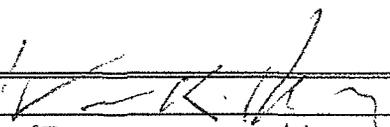
DECLARATION OF GIFT

NAME OF DONOR	19 Sports Association
DONOR'S ADDRESS	POB 26080 Honolulu, HI 96825
DONOR'S TELEPHONE	808-394-1100
STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE	
<p>I own the item described below and desire to give the property to the City and County of Honolulu. To carry out my purpose, I do hereby absolutely and without condition or reservation give, grant and convey the property to the City and County of Honolulu.</p>	
DESCRIPTION OF GIFT	
<p>Complete and accurate description of gift in detail. Enclose a photo if available.</p>	VALUE Actual or Estimated 500.00
Monetary Donation for Central Oahu Regional Park maintenance and upkeep expenses.	
Signature: 	Date: 4/27/09
Print Name: Roger Dequina	Title: Program Director

City and County of Honolulu

DECLARATION OF GIFT	
NAME OF DONOR	OIA
DONOR'S ADDRESS	4301 Salt Lake Blvd. Hon. 96818
DONOR'S TELEPHONE	481-4394
STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE	
<p>I own the item described below and desire to give the property to the City and County of Honolulu. To carry out my purpose, I do hereby absolutely and without condition or reservation give, grant and convey the property to the City and County of Honolulu.</p>	
DESCRIPTION OF GIFT	VALUE
<p>Complete and accurate description of gift in detail. Enclose a photo if available.</p> <p>Funds are to assist with daily operation and upkeep expenses of the Veterans Memorial Aquatic Center at Central Oahu Regional Park.</p> <p style="text-align: center;"><i>OIA Donation Check 8353</i></p>	<p>Actual (if available) or Estimated</p> <p style="text-align: center;"><i>\$00</i></p>
Signature: 	Date: 5-6-09
Print Name: Dwight Toyama	Title: Ex. Director

City and County of Honolulu

DECLARATION OF GIFT	
NAME OF DONOR	DAVID K. WONG
DONOR'S ADDRESS	2440 Date St. #1004 Honolulu, Hawaii 96826
DONOR'S TELEPHONE	(808) 721-7432
STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE	
<p>I own the item described below and desire to give the property to the City and County of Honolulu. To carry out my purpose, I do hereby absolutely and without condition or reservation give, grant and convey the property to the City and County of Honolulu.</p> <p style="text-align: center;">BERETANIA COMMUNITY PARK</p>	
DESCRIPTION OF GIFT	VALUE
<p>Complete and accurate description of gift in detail. Enclose a photo if available.</p> <p style="text-align: center;">STIGA PING PONG TABLE</p>	<p>Actual (if available) or Estimated</p> <p style="text-align: center;">\$400.00</p>
Signature: 	Date: <i>Apr. 13, 2000</i>
Print Name: <i>David K. Wong</i>	Title:

City and County of Honolulu

DECLARATION OF GIFT	
NAME OF DONOR	ROBYN NAKASONE
DONOR'S ADDRESS	P.O. BOX 785 AIEA, HI 96701
DONOR'S TELEPHONE	429-9449
STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE	
<p>I OWNED THE ITEMS LISTED BELOW AND WOULD LIKE TO DONATE IT TO PUPUKA BEACH PARK.</p>	
DESCRIPTION OF GIFT	VALUE
<p>1 EA. PING PONG TABLE 6 EA. PADDLES 20 EA. BALLS 2 EA. NETS 2 EA. NET POST</p>	<p>\$500.00</p>
Signature: <i>Robyn Nakasone</i>	Date: 6/18/09
Print Name: ROBYN NAKASONE	Title:

City and County of Honolulu

DECLARATION OF GIFT	
NAME OF DONOR	Koko Head School
DONOR'S ADDRESS	189 Lunalilu Home Rd, Hon, HI 96825
DONOR'S TELEPHONE	397-5811
STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE	
<p>I own the item described below and desire to give the property to the City and County of Honolulu. To carry out my purpose, I do hereby absolutely and without condition or reservation give, grant and convey the property to the City and County of Honolulu.</p>	
DESCRIPTION OF GIFT	VALUE
<p>Complete an accurate description of gift in detail. Enclose a photo if available.</p> <p style="font-size: 1.2em;">Check # 03421 Bank of Hawaii</p>	<p>Actual (if available) or estimated</p> <p style="font-size: 1.2em;">\$50-</p>
Signature: <i>[Signature]</i>	Date: 6/1/09
Print Name: <i>[Name]</i>	Title: <i>[Title]</i>