

OFFICE OF THE CITY CLERK

CITY AND COUNTY OF HONOLULU
530 SOUTH KING STREET, ROOM 100
HONOLULU, HAWAII 96813-3077
TELEPHONE: (808) 768-3810 • FAX: (808) 768-3835

GLEN I. TAKAHASHI
CITY CLERK

20SEP16 PM 4:46 CITY CLERK

AUTOMATIC ACCEPTANCE OR REJECTION OF GIFTS

Ref: (D-563)

DATE: September 17, 2020
TO: James D. Howe, Jr., Director
Honolulu Emergency Services Department
SUBJECT: Gifts of value at \$2,500 or less

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 acceptance of gifts (Communication D-563) was filed with the Council on August 18, 2020. As of September 17, 2020 the gift was deemed **accepted**.

GLEN I. TAKAHASHI
City Clerk

gu

Enclosure: D-563

Acknowledgement:

Ikaika Anderson
Chair, Honolulu City Council

COUNCIL COM. 264

HONOLULU EMERGENCY SERVICES DEPARTMENT
CITY AND COUNTY OF HONOLULU

3375 KOAPAKA STREET, SUITE H-450 • HONOLULU, HAWAII 96819-1814
Phone: (808) 723-7800 • Fax: (808) 723-7836



KIRK CALDWELL
MAYOR

JAMES D. HOWE, JR.
DIRECTOR

IAN T.T. SANTEE
DEPUTY DIRECTOR

August 11, 2020

The Honorable Ikaika Anderson, Chair
Honolulu City Council
530 South King Street, Room 202
Honolulu, Hawaii 96813

Dear Chair Anderson and Councilmembers:

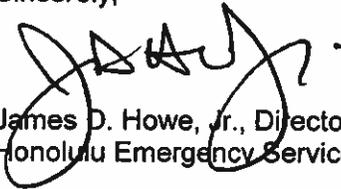
RE: Quarterly Report of Gifts Valued at \$2,500 or Less and Requested Acceptance

This report to Council enumerates all gifts taken into custody by the Honolulu Emergency Services Department for the quarter ending June 30, 2020. This report is submitted under the provisions of Resolution No. 05-349, CDI, FDI. Information on each gift is set forth in the attached Exhibit A, "Quarterly Report of Gifts Received Valued at \$2,500 or Less Under Resolution No. 05-349, CDI, FDI."

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

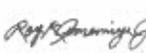
Please feel free to call me at 723-7800, if you have any questions regarding this report.

Sincerely,


James D. Howe, Jr., Director
Honolulu Emergency Services Department

Attachment

APPROVED:


Digitally signed by Amemiya,
Roy K Jr
Date: 2020.08.17 15:56:09
+0000

Roy K. Amemiya, Jr.
Managing Director

DEPT. COM. 563

PSW

Exhibit A

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

City Agency: Honolulu Emergency Services Department

Quarter Ending: June 30, 2020

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

Description of Gift	Donor's Estimated Value of Gift	Donor
Bento boxes for lunch	\$1,320	Raynor Overhead Doors & Gates
Face masks	\$700	Kenneth Morris
Face shields	\$0	Iolani School
Face shields	\$300	Kamanu Composites
Hand sanitizers (1 st donation)	\$1,407	Aloha Green Holding, Inc.
Hand sanitizers (2 nd donation)	\$2,010	Aloha Green Holding, Inc.
Water boxes	\$550	Pacific Aqua Beverages
Breakfast meal & gift bag	\$150	Arcadia Family of Companies
Lunch	\$100	Fozia Fearnley
Cloth masks	\$250	Na Mea Hawaii
Cloth masks (2 donations)	\$375	Sandy Choy
Bentos & care packs	\$300	15 Craigsid Retirement Community
Face masks	\$0	Tim Mo
Cloth masks	\$100	Le Jardin Academy
Bentos	\$500	Triton Concrete Coatings
Snacks	\$540	Sticky Fingers Snacks LLC
Packaged meal (2 donations)	\$1,200	Central Pacific Bank Foundation
Bentos	\$1,500	MW Restaurant
Check donation	\$500	Alexion Pharmaceuticals
Meals	\$900	Mandalay Hawaii
Meals	\$600	Tommy Bahama Restaurant Waikiki
Masks N95	\$2000	Min Zhu/Hawaii Chinese American & Local Community
Cookies	\$1000	Four Seasons Resort Oahu at Ko Olina
Cookies	\$1,000	Honolulu Cookie Company
Cash (3 donations)	\$300	Hawaii National Bank



CITY AND COUNTY OF HONOLULU

DECLARATION OF GIFT

NAME OF DONOR	Raynor Overhead Doors and Gates Inc.
DONOR'S ADDRESS	96-1368 Waihona Street #4
	Pearl City, HI 96782
DONOR'S TELEPHONE	(808) 284-1947

STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE

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

DESCRIPTION OF GIFT	VALUE
34 Bento Boxes for EMT/Paramedics, Chiefs, others who the City decides to give them to.	\$ 374.00
TOTAL	\$ 374.00

SIGNATURE: *Peter Eldridge*

DATE: 5/5/2020

PRINT NAME: Peter Eldridge

TITLE: President



CITY AND COUNTY OF HONOLULU

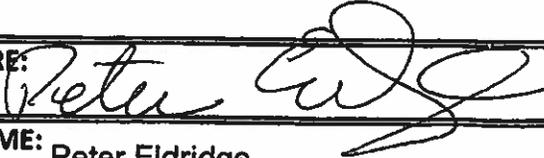
DECLARATION OF GIFT

NAME OF DONOR	Raynor Overhead Doors and Gates Inc.
DONOR'S ADDRESS	96-1368 Waihona Street #4
	Pearl City, HI 96782
DONOR'S TELEPHONE	(808) 284-1947

STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE

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

DESCRIPTION OF GIFT	VALUE
30 - Bento boxes for lunches for EMT/Paramedics	\$ 330.00
TOTAL \$ 330.00	

SIGNATURE: 

DATE: 4/23/2020

PRINT NAME: Peter Eldridge

TITLE: President



CITY AND COUNTY OF HONOLULU

DECLARATION OF GIFT

NAME OF DONOR	Raynor Overhead Doors and Gates Inc.
DONOR'S ADDRESS	96-1368 Waihona Street #4
	Pearl City HI 96782
DONOR'S TELEPHONE	(808) 284-1947 *cell

STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE

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

DESCRIPTION OF GIFT	VALUE
Bento Boxes for Lunches to Dispatch, EMT and paramedics 52	\$ 616.00
TOTAL	\$ 616.00

SIGNATURE:

DATE: 4/14/2020

PRINT NAME: Peter Eldridge

TITLE: President

x 4/14/20
Approved - HESD Director Date



CITY AND COUNTY OF HONOLULU

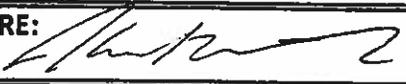
DECLARATION OF GIFT

NAME OF DONOR	Kenneth Morris
DONOR'S ADDRESS	1561 Uluoa St.
	Kaunua, HI 96734
DONOR'S TELEPHONE	(808) 753-2887

STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE

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

DESCRIPTION OF GIFT	VALUE
Face Masks x 1,000	\$700.00
TOTAL	\$0.00 \$700.00

SIGNATURE: 	DATE: 4/8/20
PRINT NAME: Kenneth Morris	TITLE: Sales Representative, Stronger



CITY AND COUNTY OF HONOLULU

DECLARATION OF GIFT

NAME OF DONOR	Iolani School
DONOR'S ADDRESS	563 Kamoku Street Honolulu, Hawaii 96826
DONOR'S TELEPHONE	808-949-5355

STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE

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

DESCRIPTION OF GIFT	VALUE
Face Shields	
TOTAL	\$ 0.00

SIGNATURE: <i>Chris Shimabuku</i>	DATE: 4/20/20
PRINT NAME: Chris Shimabuku	TITLE:



CITY AND COUNTY OF HONOLULU

DECLARATION OF GIFT

NAME OF DONOR	Kamanu Composites
DONOR'S ADDRESS	905 Kalaniana'ole Hwy
	STE 601
	Kailua HI 96734
DONOR'S TELEPHONE	808 639 7782

STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE

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

DESCRIPTION OF GIFT	VALUE
50 Face Shields	\$ 300.00
TOTAL \$ 300.00	

SIGNATURE: 	DATE: 04/08/2020
PRINT NAME: Aria Juliet Castillo	TITLE: Office Manager



CITY AND COUNTY OF HONOLULU

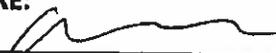
DECLARATION OF GIFT

NAME OF DONOR	Le Jardin Academy
DONOR'S ADDRESS	917 Kalaniana'ole Hwy Kailua, HI 96734
DONOR'S TELEPHONE	808 265-7763

STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE

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

DESCRIPTION OF GIFT	VALUE
cloth masks	100 00
TOTAL \$ 0.00	

SIGNATURE: 	DATE:
PRINT NAME: Christina Hoe	TITLE: Dir. of experiential ed.



CITY AND COUNTY OF HONOLULU

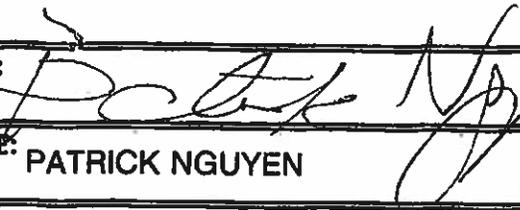
DECLARATION OF GIFT

NAME OF DONOR	TRITON CONCRETE COATINGS
DONOR'S ADDRESS	455 ANOLANI ST. HONOLULU, HI 96821
DONOR'S TELEPHONE	(808) 599-0908

STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE

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

DESCRIPTION OF GIFT	VALUE
JAPANESE BENTO MEALS FROM A LOCAL RESTAURANT	\$ 500.00
TOTAL \$ 500.00	

SIGNATURE: 

DATE: 5/22/2020

PRINT NAME: PATRICK NGUYEN

TITLE: PRESIDENT



CITY AND COUNTY OF HONOLULU

DECLARATION OF GIFT

NAME OF DONOR	Sticky Fingers Snacks LLC
DONOR'S ADDRESS	PO BOX 1716
	Aiea, HI 96701
DONOR'S TELEPHONE	808-779-0186

STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE

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

DESCRIPTION OF GIFT	VALUE
	270.00
	270.00
	TOTAL \$ 0.00

SIGNATURE:

DATE: 05/08/20

PRINT NAME: Robyn Fujita

TITLE: Owner



CITY AND COUNTY OF HONOLULU

DECLARATION OF GIFT

NAME OF DONOR	Central Pacific Bank Foundation
DONOR'S ADDRESS	PO Box 3590
	Honolulu, HI 96811-3590
DONOR'S TELEPHONE	(808) 544-3762

STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE

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

DESCRIPTION OF GIFT	VALUE
30 Individually packaged meals (breakfast) prepared by Murphy's Bar & Grill	\$ 600.00
TOTAL	\$ 600.00

SIGNATURE: <small>Digitally signed by:</small> <i>Kyle Sakamoto</i>	DATE: May 21, 2020
PRINT NAME: Kyle Sakamoto	TITLE: VP & Treasurer



CITY AND COUNTY OF HONOLULU

DECLARATION OF GIFT

NAME OF DONOR	Chanel Hebaru /CPB
DONOR'S ADDRESS	801 S King St Suite 300 / PO Box 3570 Honolulu, HI 96813 / 96811-3570
DONOR'S TELEPHONE	808-544-3740

STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE

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

DESCRIPTION OF GIFT	VALUE
30 individually packaged meals for Maui County Police Dept, Lahaina <i>Honolulu EMS</i> <i>GA</i>	600
TOTAL	<i>or</i> \$0.00 600.00

SIGNATURE: <i>Chanel Hebaru</i>	DATE: May 22, 2020
PRINT NAME: Chanel Hebaru	TITLE: Marketing & Events Officer



CITY AND COUNTY OF HONOLULU

DECLARATION OF GIFT

NAME OF DONOR	MW Restaurant
DONOR'S ADDRESS	1538 Kapiolani Blvd Unit 107
	Honolulu, HI 96814
DONOR'S TELEPHONE	(808)955-6505

STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE

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

DESCRIPTION OF GIFT	VALUE
100 Chef Choice Bentos donated to Honolulu EMS.	\$15.00 each
TOTAL \$1,500. ⁰⁰	

SIGNATURE: *Wade Ueoka*

DATE: 5/27/2020

PRINT NAME: Wade Ueoka

TITLE: Owner



U.S. Tax ID/EIN # 996001257

CITY AND COUNTY OF HONOLULU

DECLARATION OF GIFT

NAME OF DONOR	Janelle Hamabata
DONOR'S ADDRESS	3200 Grandeur Ave.
	Atadena, CA. 91001
DONOR'S TELEPHONE	(626) 826-1255

STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE

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

DESCRIPTION OF GIFT	VALUE
During this Covid-19 emergency crisis, I would like this donation to be utilized for purchases to assist paramedics and EMT's within the Honolulu EMS system.	
TOTAL	\$500.00

SIGNATURE:	DATE: 4.14.2020
PRINT NAME: Janelle Hamabata	TITLE: Regional account Manager, Alexion Pharmaceuticals.



100
300

CITY AND COUNTY OF HONOLULU

DECLARATION OF GIFT

NAME OF DONOR	The Mandalay Hawaii
DONOR'S ADDRESS	1055 Alakea Street
	Honolulu Hawaii 96813
DONOR'S TELEPHONE	808-381-2163

STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE:

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

DESCRIPTION OF GIFT	VALUE
<p>100 Individually packed meals for our EMTs during EMT week. Each plate will contain Rice, Salt and Pepper Pork chops, Sauteed Broccoli, and Potatoes</p> <p>*Items contain sesame seeds and nuts</p> <p>Request to deliver by May 21st, Thursday.</p>	\$9.00 / plate
TOTAL	\$ 0.00 - 900.00

SIGNATURE: *Linda Y.W. Chan*

DATE: 5/13/2020

PRINT NAME: Linda Y.W. Chan

TITLE: Owner



CITY AND COUNTY OF HONOLULU

DECLARATION OF GIFT

NAME OF DONOR	Tommy Bahama Restaurant Waikiki
DONOR'S ADDRESS	298 Beachwalk Drive Honolulu, HI 96815
DONOR'S TELEPHONE	808.923.8785

STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE

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

DESCRIPTION OF GIFT	VALUE
30 Plates - Rigatoni Bolognese, House Salad, Garlic Bread, Mini Malted Pie	\$ 600.00
TOTAL	\$ 600.00

SIGNATURE:

DATE: 06/17/20

PRINT NAME: Kenneth MacKenzie

TITLE: Executive Chef



CITY AND COUNTY OF HONOLULU

DECLARATION OF GIFT

NAME OF DONOR	Min zhu / represents
DONOR'S ADDRESS	Hawai'i Chinese American and local community
	99-577 Malama Heights Road
	Aiea, 96701
DONOR'S TELEPHONE	808-753-7313

STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE

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

DESCRIPTION OF GIFT	VALUE
3M-9010CN - N95 500 pieces	2000 \$
TOTAL \$ 0.00	

SIGNATURE:	DATE: 5/19/2020
PRINT NAME: min zhu	TITLE: APRN



CITY AND COUNTY OF HONOLULU

DECLARATION OF GIFT

NAME OF DONOR	Four Seasons Resort Oahu at Ko Olina
DONOR'S ADDRESS	92-1001 Olani Street Kapolei, HI 96707
DONOR'S TELEPHONE	(808) 679-3364
STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE	
I do hereby absolutely and without condition or reservation give, grant, and convey the item described below to the City and County of Honolulu.	
DESCRIPTION OF GIFT	VALUE
575 pieces - Honolulu Cookie Company	\$1,000
TOTAL \$1,000.	
SIGNATURE: 	DATE: 6-2-20
PRINT NAME: Michelle Edwards	TITLE: Dir. of PR

*OCS REVISED 10/2016



CITY AND COUNTY OF HONOLULU

DECLARATION OF GIFT

NAME OF DONOR	DARALYN BUGARIN (HONOLULU COOKIE COMPANY)
DONOR'S ADDRESS	45-404 KONALE PLACE
	KANEOHE HI, 96744
DONOR'S TELEPHONE	808-294-8075

STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE

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

DESCRIPTION OF GIFT	VALUE
LOOSE COOKIES - ASSORTED	\$ 1,000.00
TOTAL \$ 1,000.00	

SIGNATURE:	DATE: 06/04/20
PRINT NAME: DARALYN BUGARIN	TITLE: STORE MANAGER - HILTON



CITY AND COUNTY OF HONOLULU

DECLARATION OF GIFT

NAME OF DONOR	Hawaii National Bank
DONOR'S ADDRESS	45 North King Street, Honolulu, HI 96817
DONOR'S TELEPHONE	(808) 528-7887

STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE

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

DESCRIPTION OF GIFT	VALUE
\$100 cash gift to Shara Molina for being selected as a Hawaii National Bank Hometown Hero to recognize her efforts during the COVID-19 Pandemic. Shara Molina was nominated by Michelle Molina, and was chosen as a winner on 6/19/2020.	
TOTAL	\$0.00

SIGNATURE: Mika Ohata <small>Digitally signed by Mika Ohata Date: 2020.06.24 15:02:25 +10'00'</small>	DATE: 6/24/2020
PRINT NAME: Mika Ohata	TITLE: Marketing Assistant



CITY AND COUNTY OF HONOLULU

DECLARATION OF GIFT

NAME OF DONOR	Hawaii National Bank
DONOR'S ADDRESS	45 North King Street, Honolulu, HI 96817
DONOR'S TELEPHONE	(808) 528-7887

STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE

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

DESCRIPTION OF GIFT	VALUE
\$100 cash gift to Mitchell Kam for being selected as a Hawaii National Bank Hometown Hero to recognize his efforts during the COVID-19 Pandemic. Mitchell Kam was nominated by Kristine Bayot, and was chosen as a winner on 6/12/2020.	\$ 100.00
TOTAL	\$ 100.00

SIGNATURE: **Mika Ohata**
Digitally signed by Mika Ohata
Date: 2020.06.19 08:47:25
+10'00'

DATE: 6/19/2020

PRINT NAME: Mika Ohata

TITLE: Marketing Assistant



CITY AND COUNTY OF HONOLULU

DECLARATION OF GIFT

NAME OF DONOR	Hawaii National Bank
DONOR'S ADDRESS	45 North King Street, Honolulu, HI 96817
DONOR'S TELEPHONE	(808) 528-7887

STATEMENT OF OWNERSHIP AND/OR TERMS OF CONVEYANCE

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

DESCRIPTION OF GIFT	VALUE
\$100 cash gift to Anthony Rossi for being selected as a Hawaii National Bank Hometown Hero to recognize his efforts during the COVID-19 Pandemic. Anthony Rossi was nominated by Annelise Rossi, and was chosen as a winner on 5/15/2020.	\$ 100.00
TOTAL	\$ 100.00

SIGNATURE: Mika Ohata <small>Digitally signed by Mika Ohata Date: 2020.06.19 11:23:36 -10'00'</small>	DATE: 6/19/2020
PRINT NAME: Mika Ohata	TITLE: Marketing Assistant

