LOBBYIST CONTRIBUTIONS AND EXPENDITURES STATEMENT

The reporting period is from January 1st through December 31st of the previous year.

This statement shall be filed on or before January 31st of each year. NOTE THAT THIS IS A PUBLIC DOCUMENT.

19

2018 STATEMENT YEAR:

DATE OF 01/08/201		NAME OF LOBBYIST MICHAEL J. BELLES		THE COUNTY CLES
	PERSON OR ORGANIZATION LECTRICIAN'S MARKET ENHAN	YOU LOBBY FOR (Do not abbreviate) CEMENT PROGRAM	· · · · · · · · · · · · · · · · · · ·	- LOUNTY OF KAUA
BUSINES	S MAILING ADDRESS	Street City State	e Zip Code	
4334 RIC	CE STREET, SUITE 202, LIHU	JE, KAUAI, HAWAII 96766		The second
	S TELEPHONE NO.			
(808) 246-	6961			
PART I: T	OTAL EXPENDITURES	1 c - Control of the		
	TURES OF \$25 OR MORE PER litures incurred by lobbyist for the purpose		ring the reporting period. Attach additional sheet(s	s) if necessary.
	section is not applicable. enditures incurred in the total sur	n of \$25 or more per day were made for	the following persons:	Amount
Date	Name of Recipient	Mailing Address (Street, City, State, Zip)	Description of Expenditure	or Value
	· · · · · · · · · · · · · · · · · · ·			
			Indianova in the control of the cont	
List all expend	section is not applicable.		uring the reporting period. Attach additional sheete	(s) if necessary. Amount
Date	Name of Recipient	Mailing Address (Street, City, State, Zip)	Description of Expenditure	or Value
		3		
			~	

PART II: CONTRIBUTIO	NS			
CONTRIBUTIONS RECE List all contributions received by l 1987, as amended. Attach addition This section is not as	abbyist for the purpose of lobbying in the to al sheet(s) if necessary.	otal sum of \$25 or more per perso	on during the statement period pursu	uant to Sec. 3-6.5(c)(3), Kaua'i County Code
	total sum of \$25 or more per perso	on were received from the	following persons:	
Date Name of Contributo		Mailing Address (Street,	City, State, Zip)	Amount or Value
	(1///10/10/10/10/10/10/10/10/10/10/10/10/			
	MANAGEM AND			AUGUSTA AUGUST
	TO THE PARTY OF TH			
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PART III: SUBJECT ARE	AS OF LOBBYING	T T T T T T T T T T T T T T T T T T T		
Legislative and/or administrative procurement, or contract managem KAUAI COUNTY CODE AN	ent that was supported or opposed.	statement reporting period. S	ihall include title of bills, resolutio	ns, and/or description of actions, permit,
Note: The term "Expenditu	res" in Ordinance No. 999 does no	t include attorney's fees pro	otected by the attorney-client	privilege.
(Hawaii Rules of Pro	fessional Conduct, Rule 1.6)			
- Commission Control of the Control				
PART IV: AUTHORIZED	PERSON			A SAME AND
MICHAEL J. BELL	ES		WOR	Q _a
Name of Authorized Person	(First, Middle, Last)	_	Signature of Authorized P	erson
Attorney		garan di te	01/08/2019	
Title	Was a state of the		Date	
appears as the "Auth	orized Person" above and the info	rmation contained in the f	orm is true, correct, and comp	at you are the person whose name plete to the best of your knowledge port the information required by

06/24/16

Ordinance No. 999.