LOBBYIST CONTRIBUTIONS AND EXPENDITURES STATEMENT

RECEVED

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.

STATEMENT YEA	R: 2022					' 23	JAN -9	MO :02
DATE OF FILING January 6, 2023		NAME OF LO					#4 T T T T T T T T T T T T T T T T T T T	Ç.
NAME OF PERSON	N OR ORGANIZATION	YOU LOBBY	FOR (Do not ab	oreviate)		80	TE Y THU	KAGAT
BUSINESS MAILI	NG ADDRESS et, Suite A, Lihue, Kau	Street uai, Hawaii 96	City 766	State	Zip Code			
BUSINESS TELEF (808) 246-6961								
PART I: TOTAL E	XPENDITURES							
List all expenditures incu	OF \$25 OR MORE PE wered by lobbyist for the purpose s not applicable. incurred in the total su	se of lobbying of \$2	5 or more per person		he reporting period. Attach additi	ional sheet(s) if neces		Amount
Date Name of R	ecipient	Mailing Add	iress (Street, City, S	tate, Zip)	Description of Expenditure			or Value
-								
List all expenditures incu	OF \$150 OR MORE Parred by lobbyist for the purposis not applicable.	se of lobbying of \$1	50 or more per perso		the reporting period. Attach add e following persons:	itional sheet(s) if nece		Amount
Date Name of F	Recipient	Mailing Add	iress (Street, City, S	State, Zip)	Description of Expenditure			or Value
·								

PART II:	CONTRIBUTIONS			
CONTRII	BUTIONS RECEIVED ributions received by lobbyist for the purpose of lobbying in inded. Attach additional sheet(s) if necessary.	the total sum of \$25 or more per person during th	ne statement period pursuant	to Sec. 3-6.5(c)(3), Kaua'i County Code
X Thi	s section is not applicable. ntributions in the total sum of \$25 or more per	person were received from the following	persons:	
Date _	Name of Contributor	Mailing Address (Street, City, State		Amount or Value
	: SUBJECT AREAS OF LOBBYING			
Legislative of	and/or administrative action supported or opposed duri , or contract management that was supported or opposed.	ng the statement reporting period. Shall includ	le title of bills, resolutions,	and/or description of actions, permit,
ZONING	AMENDMENT			
Note: Th	e term "Expenditures" in Ordinance No. 999 doe	es not include attorney's fees protected b	y the attorney-client priv	/ilege.
(H	lawaii Rules of Professional Conduct, Rule 1.6)			
PART IV	: AUTHORIZED PERSON			
Micha	el J. Belles		1000	De
	Authorized Person (First, Middle, Last)	Signa	ture of Authorized Pers	son
Attorn			1/6/23	
Title		Date		
CE	CRTIFICATION: By checking this box or signi- pears as the "Authorized Person" above and the d belief. You further certify that you under	information contained in the form is Lt	ue, correct, and complet	te to the best of your knowledge

Ordinance No. 999.