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.

STATEMENT YEAR: JAN -9 A10:03 NAME OF LOBBYIST DATE OF FILING January 6, 2023 MAX W. J. GRAHAM, JR. NAME OF PERSON OR ORGANIZATION YOU LOBBY FOR (Do not abbreviate) TOWER KAUAI LAGOONS LAND, LLC BUSINESS MAILING ADDRESS Zip Code Street City State 3135 Akahi Street, Suite A, Lihue, Kauai, Hawaii 96766 BUSINESS TELEPHONE NO. (808) 246-6962 PART I: TOTAL EXPENDITURES EXPENDITURES OF \$25 OR MORE PER PERSON PER DAY List all expenditures incurred by lobbyist for the purpose of lobbying of \$25 or more per person per day during the reporting period. Attach additional sheet(s) if necessary. This section is not applicable. Expenditures incurred in the total sum of \$25 or more per day were made for the following persons: Amount Mailing Address (Street, City, State, Zip) Description of Expenditure Date Name of Recipient or Value EXPENDITURES OF \$150 OR MORE PER PERSON PER DAY List all expenditures incurred by lobbyist for the purpose of lobbying of \$150 or more per person per day during the reporting period. Attach additional sheet(s) if necessary. This section is not applicable. Expenditures incurred in the total sum of \$150 or more per day were made for the following persons: Amount or Value Date Name of Recipient Mailing Address (Street, City, State, Zip) Description of Expenditure

PART II: CONTRIBUTIONS			
CONTRIBUTIONS RECEIVED List all contributions received by lobbyist for the purpose of 1987, as amended. Attach additional sheet(s) if necessary. This section is not applicable.	· · ·		! pursuant to Sec. 3-6.5(c)(3), Kaua'i County Code
Contributions in the total sum of \$25 or 1		- -	A
Date Name of Contributor	Ma	iling Address (Street, City, State, Zip)	Amount or Value
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PART III: SUBJECT AREAS OF LOBBYING	ž		
Legislative and/or administrative action supported or opprocurement, or contract management that was supported on BILL NO. 2831		reporting period. Shall include title of bills, res	olutions, and/or description of actions, permit,
BILL NO. 2031	The last of the state of		
Note: The term "Expenditures" in Ordinance No	. 999 does not include a	attornev's fees protected by the attornev-cl	lient privilege.
(Hawaii Rules of Professional Conduct, R			
PART IV: AUTHORIZED PERSON			
March I Cushama In		1	
Max W. J. Graham, Jr.			
Name of Authorized Person (First, Middle, Last)		Signature of Authoriz	æd Person
Attorney		$\frac{1}{Date}$	3
Title		Date	
CERTIFICATION: By checking this box	or signing your name	on this Statement, you certify and affirm	that you are the person whose name

CERTIFICATION: By checking this box or signing your name on this Statement, you certify and affirm that you are the person whose name appears as the "Authorized Person" above and the information contained in the form is true, correct, and complete to the best of your knowledge and belief. You further certify that you understand that there are statutory penalties for failing to report the information required by Ordinance No. 999.