'22 JAN 10 A6:16





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.

STATEMI	ENT YEAR: 2021						
DATE OF	FILING 61 00 2022 NA	ME OF LOBBYIST AMU HE	nnessily				
	F PERSON OR ORGANIZATION YOU Initiative	J LOBBY FOR (Do not abbreviate)					
	SS MAILING ADDRESS hop Street, Suite 1202, Honolulu,	Street City State HI, 96813	Zip Code				
BUSINES 808-544	SS TELEPHONE NO. 1-8960						
PART I: 7	OTAL EXPENDITURES			***************************************			
List all expen	ITURES OF \$25 OR MORE PER PE ditteres incurred by lobbyist for the purpose of lo		reporting period. Attach additional sheet(s) if necessary.				
Expenditures incurred in the total sum 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			
			***************************************				
List all expen			re reporting period. Attach additional sheet(s) if necessary.				
	s section is not applicable. senditures incurred in the total sum of	\$150 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			
				-			
			E				
	Value of the state						

PART	II: CONTRIBUTIONS			
List all ( 1987, as	RIBUTIONS RECEIVED contributions received by lobbyist for the purpose of lob amended. Attach additional sheet(s) if necessary.  This section is not applicable.  Contributions in the total sum of \$25 or mo:			t to Sec, 3-6.5(c)(3), Kana'i County Code
Date	Name of Contributor	Mailing Address (Street	, City, State, Zip)	Assount or Velue
PART	III: SUBJECT AREAS OF LOBBYING			
	ve and/or administrative action supported or oppositent, or contract management that was supported or op		Shall include title of bills, resolutions,	and/or description of actions, permit,
n/a				
				***************************************
				***************************************
			# . # . # . # . # . # . # . # . # . # .	<u> </u>
PART	IV: AUTHORIZED PERSON			
és.	. 1		N. A.	
AY	My Hennessey orandhorized Person (First, Middle, Last)			
			Signature of All Roorized Fern	son
Sev	for VP Communications	+ External Agains	January 7, 2022	
Title		00	Date	Annual Control of the
	CERTIFICATION: By checking this box or appears as the "Authorized Person" above a and belief. You further certify that you Ordinance No. 999.	nd the information contained in the	form is true, correct, and comple	te to the best of your knowledge

06/24/16