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: 2021

DATE OF 1/3/21	PE OF FILING NAME OF LOBBYIST /21 Nathaniel Kinney					RECEIVED	
	F PERSON OR ORGANIZATION		abbreviate)			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	Regional Council of Carpente SS MAILING ADDRESS	······································	C	77: 73 1	*22 JAN -7 P3	:15	
		Street City	State	Zip Code	CHHY I I	.15	
	loughtailing St., Honoluluss TELEPHONE NO.	і, Пі, 900 г/	>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>				
(808) 440-					TALL BUSTY CLEA	Ma L F	
(000) 110 0111					COUNTY OF KAUAT		
PART I: T	OTAL EXPENDITURES	***************************************		***************************************	OODIET I CI TINGF	<u> </u>	
	s section is not applicable. enditures incurred in the total su	um of \$25 or more per day we	ere made for the	following persons:			
						Amount	
ate	Name of Recipient	Mailing Address (Street, City	, State, Zip)	Description of Expenditure		or Value	
					Vanantanian		

ist all expend	TURES OF \$150 OR MORE Plantitures incurred by lobbyist for the purposes section is not applicable. enditures incurred in the total su	se of lobbying of \$150 or more per pe			onal sheet(s) if necessary.	Amount	
Date	Name of Recipient	Mailing Address (Street, City	, State, Zip)	Description of Expenditure		or Value	

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PART II: CONTRIBUTIONS				
1987, as amended. Attach additional sheet(s) if necess	ose of lobbying in the total sum of \$25 or more per person during the statement period pursary. 5 or more per person were received from the following persons:	suant to Sec. 3-6.5(c)(3), Kaua'i County Code		
Date Name of Contributor	Mailing Address (Street, City, State, Zip)	Amount or Value		
PART III: SUBJECT AREAS OF LOBBY Legislative and/or administrative action supported of procurement, or contract management that was supported to the contract management of the contract management and contract management and contract management that was supported to the contract management and	or opposed during the statement reporting period. Shall include title of bills, resolution	ons, and/or description of actions, permit,		
PART IV: AUTHORIZED PERSON				
Ronald Taketa	Frey 2	generation of the second of th		
Name of Authorized Person (First, Middle,		Signature of Authorized Person		
Executive Secretary Trea	isurer 1/3/22	1/3/22		
Title	Date	Date		

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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.