STARN.O'TOOLE.MARCUS & FISHER

A LAW CORPORATION

RECEIVED

December 12, 2022

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VIA E-MAIL: cokcouncil@kauai.gov

Office of the County Clerk Council Services Division 4396 Rice Street, Suite 209 Lihue, HI 96766 STRICE OF THE LOUNTY CLERK COUNTY OF KAUA'T

Re:

Lobbyist Name: Douglas S. Chin

Organization Lobbying for: Princeville at Hanalei Community Association

TERMINATION OF LOBBYIST REGISTRATION

Dear County Clerk:

This is to notify your office that I am terminating my lobbyist registration for Princeville at Hanalei Community Association effective immediately. I have enclosed my Lobbyist Registration Statement dated June 24, 2021 for your reference. Per your request, I have also enclosed my Lobbyist Contributions and Expenditures Statement for 2022.

Should you have any questions regarding the above, please contact me at (808) 537-6100 or dchin@starnlaw.com.

Sincerely,

Douglas S. Chin

Encls.



LOBBYIST REGISTRATION STATEMENT

You must file this statement with the Office of the County Clerk if you are an individual who for pay or other consideration engages in lobbying on behalf of another person, or organization, for more than five (5) hours in any month or spends more than \$750 lobbying during any reporting period (January 1st through December 31st of the previous year). NOTE THAT THIS IS A PUBLIC DOCUMENT.

(Type or Print Clearly)				
NAME Last	F ir	est	Middle	
Chin, Douglas S.				
BUSINESS MAILING ADDRESS	Street	City	State	Zip Code
733 Bishop Street, Suite 1900, Honolulu, HI 96813				
TELEPHONE NO.	E-MAIL			
(808) 537-6100	dchin@starnlav	v.com		
NAME OF PERSON OR ORGANIZATION YOU LOBBY FOR (do not abbreviate)				
Princeville at Hanalei Community Association				
BUSINESS MAILING ADDRESS	Street	City	State	Zip Code
P.O. Box 223277, Princeville, HI 96722				
BUSINESS TELEPHONE NO.				
(808) 826-6687				

SUBJECT AREAS OF LOBBYING
(Bill/Resolution Number(s), Agenda Item(s), and/or Topic(s))
(1) Bill No. 2822 (Kaua'i County Council); and
(2) SOF-XI KAUAI PV GOLF, L.P.'s application for a Project Development Use Permit, Use Permit, and Class IV
Zoning Permit concerning property located at Princeville and Hanalei, Halalea, Kaua'i, Hawai'i,
identified by TMK Nos. (4) 5-4-006:003,005 and 006 (Kaua'i Planning Department / Kaua'i Planning Commission).

CERTIFICATION OF LOBBYIST				
I hereby certify that the informatio	on furnished above is, to the best of my ki	nowledge, correct and complete.		
WXV	6/24/202	21		
(Signature of Lobbyist)	(Date)			
	AUTHORIZATION TO LOBBY			
NAME Maylette Garces	TITLE OF AUTHORIZING OFFICER OF PERSON REPRESENTED General Manager			
NAME OF ORGANIZATION (if ap Princeville at Hanalei Community Asso		TELEPHONE NO. (808) 826-8687		

ADDRESS OF ORGANIZATION OR PERSON Zip Code Street City State P.O. Box 223277, Princeville, HI 96722

I hereby, authorize the above-named person to engage in lobbying activities on behalf of the undersigned.

(Signature of Authorizing Officer)

05/24/16

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.

STATEMENT YEAR: 2022

F						
DATE OF		NAME OF LOBBYIST				
12/12/202						
	PERSON OR ORGANIZATION		FOR (Do not a	bbreviate)		
	at Hanalei Community Associati					
	S MAILING ADDRESS	Street	City	State	Zip Code	
	op Street, Suite 1900, Honol	ulu, HI 96813				
	S TELEPHONE NO.					
(808) 537-	6100		* *** · · ·			
PART I: TO	OTAL EXPENDITURES					
List all expend	TURES OF \$25 OR MORE PE litures incurred by lobbyist for the purpo section is not applicable. enditures incurred in the total so	se of lobbying of \$25	5 or more per perso		ne reporting period. Attach additional sheet(s) i following persons:	•
Date	Name of Recipient	Mailing Add	ress (Street, City,	State, Zip)	Description of Expenditure	Amount or Value
List all expend	TURES OF \$150 OR MORE P litures incurred by lobbyist for the purpo section is not applicable. enditures incurred in the total so	se of lobbying of \$15	50 or more per per		the reporting period. Attach additional sheet(s)	if necessary.
Date	Name of Recipient	Mailing Add	ress (Street, City,	State, Zip)	Description of Expenditure	or Value

PART I	I: CONTRIBUTIONS		
List all co 1987, as a	whended. Attach additional sheet(s) if necessary. This section is not applicable.	the total sum of \$25 or more per person during the statement period pur 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 I	II: SUBJECT AREAS OF LOBBYING		
	e and/or administrative action supported or opposed durient, or contract management that was supported or opposed.	ng the statement reporting period. Shall include title of bills, resolut	ions, and/or description of actions, permit,
N/A			
PART I	V: AUTHORIZED PERSON		
Doug	las S. Chin	asu	
Name of	f Authorized Person (First, Middle, Last)	Signature of Authorized	Person
Attori	ney	12/12/2022	
Title		Date	

X

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.