

23 SEP 26 A8:08

## 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 Strona, Sara S. T.		Fir	st	Middle						
BUSINESS MAIL	ING ADDRESS	Street	City	State	Zip Code					
Starn O'Toole Marcus & Fisher, 733 Bishop Street, Suite 1900, Honolulu, HI 96813										
TELEPHONE NO. (808) 537-6100										
	N OR ORGANIZATIO Corp. and Falk USA, Ir		FOR (do not ab	breviate)						
BUSINESS MAILING ADDRESS Street City State Zip Code 1517 W. Braden Court, Orange, CA 92868, c/o Brian Richmond, Director - Head of US Legal										
BUSINESS TELE (425) 478-8318	PHONE NO.									

SUBJECT AREAS OF LOBBYING
(Bill/Resolution Number(s), Agenda Item(s), and/or Topic(s))

Matters relating to the Kauai County Council's position regarding the State of Hawaii Department of Health

Emergency Medical Services & Injury Prevention System Branch's 8/29/2023 award of a contract (RFP No. HTH-730-1-23

for Comprehensive Emergency Medical Services for 911 Ground Ambulance Transport for County of Kauai) to

Falck Northwest Corp., and related issues.

CER	TIFICATION OF LOBBYIST
I hereby certify that the information furnish	ted above is, to the best of my knowledge, correct and complete.
2 12	09/20/2023

	AUTHO	RIZATION	TO LOBE	3 <b>Y</b>		
AME TITLE OF AUTHORIZING OFFICER OF PERSON REPRESENTED Director - Head of US Legal						
NAME OF ORGANIZATION (if application for the state of the		TELEPHONE NO. (425) 478-8318				
ADDRESS OF ORGANIZATION OR PERSON Street 1517 W. Braden Court, Orange, CA 92868			City	Sta	te	Zip Code
Free By Bankbrize the above-named person to eng	gage in lobby	ying activities	on behalf of 11 09/13/2:		gned.	
(Signature of Authorizing Officer)			(Date)			
Constitution of the state of th						