## 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.

2019

ST	A	T	E	N	Æ	I	T	YE	A	R:			

STATEME	NT YEAR:								
	DATE OF FILING 01/30/20  NAME OF LOBBYIST Kevan Greg Gaug								
Ulupon	PERSON OR ORGANIZATION YO Initiative	OU LOBBY FO	OR (Do not abbre	viate)					
	S MAILING ADDRESS hop Street Suite 1202, Honolul	Street J, HI, 96813	City	State	Zip Code	*20 JAN 31 P1	:32		
BUSINES (808)54	S TELEPHONE NO. <b>4-8960</b>					THE CHARGE OF			
PARTIT	OTAL EXPENDITURES					COUNTY OF KAU	4.1		
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:									
Date	Name of Recipient		ss (Street, City, State		Description of Expenditure		Amount or Value		
				***************************************					
List all expens	TURES OF \$150 OR MORE PER ditures incurred by lobbyist for the purpose of section is not applicable. enditures incurred in the total sum	lobbying of \$150	or more per person p			litional sheet(s) if necessary.	Amount		
Date	Name of Recipient	Mailing Addres	ss (Street, City, State	e, Zip)	Description of Expenditure		or Value		

PART II: CONTRIBUTIONS  CONTRIBUTIONS RECEIVED		
List all contributions received by toobyist for the purpose of 1987, as amended. Attach additional sheet(s) if necessary.	of lobbying in the total sum of \$25 or more per person during the statement period	pursuant to Sec. 3-6.5(c)(3), Kaua'i County Code
This section is not applicable. Contributions in the total sum of \$25 or	more per person were received from the following persons:	
Date Name of Contributor	Mailing Address (Street, City, State, Zip)	Amount or Value
PART III: SUBJECT AREAS OF LOBBYIN	IG .	
Legislative and/or administrative action supported or o procurement, or contract management that was supported	opposed during the statement reporting period. Shall include title of bills, resor opposed.	colutions, and/or description of actions, permit,
N/A		
PART IV: AUTHORIZED PERSON		
Murray R. Clay	May	2 mg
Name of Authorized Person (First, Middle, Las President	,	
		1/20
Title	Date	
appears as the "Authorized Person" abo	ex or signing your name on this Statement, you certify and affirm two and the information contained in the form is true, correct, and you understand that there are statutory penalties for failing to	complete to the best of your knowledge

06/24/16

Ordinance No. 999.