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LOBBYIST REGISTRATION STATEMENT

OFFICE OF THE COUNTY CLERK
COUNTY OF MAUI

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	First	Middle
	RUIZ	SRIMANTHA	N
BUSINESS MAILING ADDRESS	Street	City	State Zip Code
	999 Bishop St., Suite 1202	Honolulu, HI	96813
TELEPHONE NO.	E-MAIL		
(808) 544 8964	sr Ruiz@ulupono.com		
NAME OF PERSON OR ORGANIZATION YOU LOBBY FOR (do not abbreviate)			
ULUPONO INITIATIVE			
BUSINESS MAILING ADDRESS	Street	City	State Zip Code
	999 Bishop St., Suite 1202	Honolulu, HI	96813
BUSINESS TELEPHONE NO.			
(808) 544 8964			

SUBJECT AREAS OF LOBBYING

(Bill/Resolution Number(s), Agenda Item(s), and/or Topic(s))

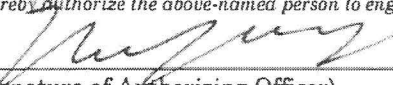
ENERGY PROJECTS AND POLICIES
SUSTAINABILITY
PUBLIC INFRASTRUCTURE
TECHNOLOGY

CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

	01/08/2021
(Signature of Lobbyist)	(Date)

AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OF PERSON REPRESENTED		
Murray Clay	President		
NAME OF ORGANIZATION (if applicable)	TELEPHONE NO.		
Ulupono Initiative	999 Bishop St. Suite 1202		808 544 8960
ADDRESS OF ORGANIZATION OR PERSON	Street	City	State Zip Code
		Honolulu, HI	96813
I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.			
	1/8/21		
(Signature of Authorizing Officer)	(Date)		