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.

PART I: TOTAL EXPENDITURES

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.

<table>
<thead>
<tr>
<th>Date</th>
<th>Name of Recipient</th>
<th>Mailing Address (Street, City, State, Zip)</th>
<th>Description of Expenditure</th>
<th>Amount or Value</th>
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</thead>
</table>

EXPENDITURES OF $150 OR MORE PER PERSON PER DAY
List all expenditures incurred by lobbyist for the purpose of lobbying of $150 or more per person per day during the reporting period. Attach additional sheet(s) if necessary.

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<tr>
<th>Date</th>
<th>Name of Recipient</th>
<th>Mailing Address (Street, City, State, Zip)</th>
<th>Description of Expenditure</th>
<th>Amount or Value</th>
</tr>
</thead>
</table>

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STATEMENT YEAR: 2017

DATE OF FILING: January 10, 2018

NAME OF LOBBYIST: Joy Gold

NAME OF PERSON OR ORGANIZATION YOU LOBBY FOR (Do not abbreviate): KYD, Inc. dba: K Yamada Distributors

BUSINESS MAILING ADDRESS: 2849 Koapaka Street, Honolulu, Hawaii 96819

BUSINESS TELEPHONE NO.: 808-836-7301
PART II: CONTRIBUTIONS

CONTRIBUTIONS RECEIVED
List all contributions received by lobbyist for the purpose of lobbying in the total sum of $25 or more per person during the statement period pursuant to Sec. 3-4.25(c)(2), Kaua‘i County Code 1987, as amended. Attach additional sheet(s) if necessary.

☒ This section is not applicable.
Contributions in the total sum of $25 or more per person were received from the following persons:

<table>
<thead>
<tr>
<th>Date</th>
<th>Name of Contributors</th>
<th>Mailing Address (Street, City, State, Zip)</th>
<th>Amount or Value</th>
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PART III: SUBJECT AREAS OF LOBBYING

Legislation and/or administrative action supported or opposed during the statement reporting period. Shall include title of bills, resolutions, and/or description of actions, permit, procurement, or contract management that was supported or opposed.

Courtesy Meetings w/ Council Members about polystyrene food containers.
No legislation at this time.

PART IV: AUTHORIZED PERSON

Dexter Yamada
Name of Authorized Person (First, Middle, Last)
President
Title

Signature of Authorized Person

Date

☒ 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. 369.