



### 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 1<sup>st</sup> through December 31<sup>st</sup> of the previous year). NOTE THAT THIS IS A PUBLIC DOCUMENT.

(Type or Print Clearly)

NAME	Last	First	Middle	
Rooney, Kathleen, King				
BUSINESS MAILING ADDRESS	Street	City	State	Zip Code
999 Bishop Street, Suite 1202	Honolulu, HI	96813		
TELEPHONE NO. (808) 544-8966	E-MAIL krooney@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 Street, Suite 1202	Honolulu, HI	96813		
BUSINESS TELEPHONE NO. (808) 544-8960				

### SUBJECT AREAS OF LOBBYING

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

Transportation, Land Use, Energy, Sustainability, Zoning, Planning

### CERTIFICATION OF LOBBYIST

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

  
\_\_\_\_\_  
(Signature of Lobbyist)

1/7/19  
\_\_\_\_\_  
(Date)

### AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OF PERSON REPRESENTED			
Murray Clay	Managing Partner			
NAME OF ORGANIZATION (if applicable)	TELEPHONE NO.			
Ulupono Initiative	(808) 544-8975			
ADDRESS OF ORGANIZATION OR PERSON	Street	City	State	Zip Code
999 Bishop Street, Suite 1202	Honolulu, HI	96813		

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

  
\_\_\_\_\_  
(Signature of Authorizing Officer)

1/15/2019  
\_\_\_\_\_  
(Date)

RECEIVED

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OFFICE OF  
THE COUNTY CLERK  
COUNTY OF KAUAI