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**LOBBYIST REGISTRATION STATEMENT** OFFICE OF

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 Kanna	First Nancy	Middle Ann		
BUSINESS MAILING ADDRESS	Street	City	State	Zip Code	
	P.O. Box 138	Hanapepe	HI	96716	
TELEPHONE NO. 808-652-0773	E-MAIL nancykanna@gmail.com				
NAME OF PERSON OR ORGANIZATION YOU LOBBY FOR (do not abbreviate) Kauai Board of REALTORS(R)					
BUSINESS MAILING ADDRESS	Street	City	State	Zip Code	
	4359 Kukui Grove St., Suite 103	Lihue	HI	96766	
BUSINESS TELEPHONE NO. 808-245-4049					

**SUBJECT AREAS OF LOBBYING**

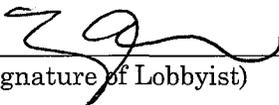
*(Bill/Resolution Number(s), Agenda Item(s), and/or Topic(s))*

Housing

Planning, Land and Water Use Management

**CERTIFICATION OF LOBBYIST**

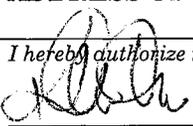
*I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.*

  
(Signature of Lobbyist)

8/3/2016

(Date)

**AUTHORIZATION TO LOBBY**

NAME Karen Ono	TITLE OF AUTHORIZING OFFICER OF PERSON REPRESENTED Executive Officer				
NAME OF ORGANIZATION (if applicable) Kauai Board of REALTORS(R)			TELEPHONE NO. 808-245-4049		
ADDRESS OF ORGANIZATION OR PERSON	Street	City	State	Zip Code	
	4359 Kukui Grove Street, Suite 103	Lihue	HI	96766	
<i>I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.</i>					
 (Signature of Authorizing Officer)			8/3/2016 (Date)		