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OFFICE OF THE COUNTY CLERK COUNTY OF KAUA'I

LOBBYIST CONTRIBUTIONS AND EXPENDITURES STATEMENT

The reporting period is from January 1" through December 31" of the previous year.

This statement shall be filed on or before January 31" of each year. NOTE THAT THIS IS A PUBLIC DOCUMENT.

STATEMENT YEAR: 2023

I m i mm i	Control of the Contro	Tillian	Tram.					
	DATE OF FILING NAME OF LOBBYIST  1/6/2024 Michael Colón							
	OF PERSON OR ORGANIZATI no Initiative	ON YOU LOBBY FOR	(Do not abbreviate)					
	ESS MAILING ADDRESS ishop Street, Suite 1202, Ho	Street nolulu, HI, 96813	City State	Zip Code				
	ESS TELEPHONE NO. 44-8960				, , , , , , , , , , , , , , , , , , , ,			
PART I:	TOTAL EXPENDITURES		germana managaran kang kang sagai kang kang sa					
List all exp	DITURES OF \$25 OR MORE senditures incurred by lobbyist for the puries section is not applicable, appenditures incurred in the total	rpose of lobbying of \$25 or n	nore per person per day dur	ing the reporting period. Attach additional sheet(s) if nea	ressary.			
Date	Name of Recipient	Mailing Address	Street, City, State, Zip)	Description of Expenditure	Amount or Value			
Date	Name of Recipient	main nadiesa (	direct, Oily, State, 219	Description of Expenditure	NI VBIAL			
				100				
List all expo	DITURES OF \$150 OR MORE enditures incurred by lobbyrst for the purities section is not applicable. Expenditures incurred in the total	rpose of lobbying of \$150 or	more per person per day du	ring the reporting period. Attach additional sheet(s) if m	ecessary.			
Date	Name of Recipient	Mailing Address	Street, City, State, Zip)	Description of Expenditure	or Value			
				***				

PART	II: CONTRIBUTIONS			Service of the servic	
ast all o	RIBUTIONS RECEIVED notributions received by lobbyist for the purpose of lanced and the Atlach additional sheet(s) if necessary.	abbying in the total sum of \$25 or more per perso	on during the statement period pursu	rant to Sec 3-6.5(c)(3), Kana'i County Co	
	This section is not applicable. Contributions in the total sum of \$25 or m	ore per person were received from the	following persons:		
Date	Name of Contributor	Mailing Address (Street,	City, State, Zip)	Amount or Value	
	5 5 4 1 4 1				
PART	III: SUBJECT AREAS OF LOBBYING				
egislatu	e and/or administrative action supported or opp		Shall include title of bills, resolution	ns, and/or description of actions, perm	
n/a	ent, or contract management that was supported or	pposea.			
ART	IV: AUTHORIZED PERSON		/	1	
Mich	nael Colón		11/1		
Name of Authorized Person (First, Middle, Last)			Signature of Authorized Person		
Director, Energy			1/6/2024		
Title			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. 999.

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