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.

STATEMENT YEAR: 2023

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		NAME OF LOBBYIST			de la companya della companya de la companya della	RECEIVED		
12/21/23								
NAME OF PERSON OR		U LOBBY FOR	R (Do not abbre	eviate)				
Grassroot Institute	Sandan De Sandan				***			
BUSINESS MAILING AI	DDRESS	Street	City	State	Zip Code 23	DEC 26	A10:10	
1050 Bishop St. #	£508 Honolulu,	HI 96813						
BUSINESS TELEPHONI						17 17 11 E ye pe	ath, sec	
808-864-1776					THE	COUNTY	O)	
t					COI	INTY OF I	CERUN CONTRACT	
PART I: TOTAL EXPEN	DITURES					1 21 1	THUM!	
The second secon								
EXPENDITURES OF \$2	5 OR MORE PER P	ERSON PER	DAY					
$List\ all\ expenditures\ incurred\ by$	lobbyist for the purpose of	lobbying of \$25 or 1	nore per person pe	r day during the	reporting period. Atta	ch additiona	l sheet(s) if necessary.	
521								
This section is not a								
Expenditures incur	red in the total sum o	of \$25 or more $\mathfrak p$	er day were m	ade for the fol	llowing persons:			A
Date Name of Recipient		Mailing Address	(Street, City, State	e Zin)	Description of Expen	diture		Amount or Value
Traine of Reofficial	,	Italian Italian	Coroco, Croy, State	o, 24p)	Decemption of Expen	artaro		Of variation
		+						
			- V					
	EA OR MORE BER		N TO 4 TT					4)
EXPENDITURES OF \$1							1 - 1 - 1 - 1 / -) : 6	
List all expenditures incurred by	toooyisi for the purpose of	todoying of \$150 or	more per person p	er aay auring in	е герогинд регюа. Ан	acn aaaiiion	iai sneei(s) if necessary.	
X This section is not a	applicable.							
	red in the total sum	of \$150 or more	per day were i	made for the f	ollowing persons:			
								Amount
Date Name of Recipient	t	Mailing Address	(Street, City, Stat	e, Zip)	Description of Expen	diture		or Value

PART II: C	CONTRIBUTIONS					
List all contrib 1987, as amen This	UTIONS RECEIVED butions received by lobbyist for the purpose of lobbying in the total sur ded. Attach additional sheet(s) if necessary. section is not applicable. cributions in the total sum of \$25 or more per person we			o Sec. 3-6.5(c)(3), Kaua'i County Code		
Date	Name of Contributor Mailing Address (Street, City, State		ty, State, Zip)	Amount or Value		
		Į.				
Legislative an	SUBJECT AREAS OF LOBBYING ad/or administrative action supported or opposed during the states or contract management that was supported or opposed.	ment reporting period. Sho	ill include title of bills, resolutions, a	nd/or description of actions, permit,		
N/A	A.					
PART IV:	AUTHORIZED PERSON					
Name of Au	dore Augustos Kefalas uthorized Person (First, Middle, Last) or of Strategic Campaigns		Signature of Authorized Person 12/21/23 Date			
11010			Dave			

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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.