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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DATE OF	FILING	NAME OF LO				VED		
NAME OF	PERSON OR ORGANIZATION	YOU LOBBY F	OR (Do not abbre	viate)				
Hawaii Re	egional Council of Carpenters							
BUSINES	S MAILING ADDRESS	Street	City	State	Zip Code 24	JAN 19	A10:13	
13111 H	oughtailing St Honolulu, HI	96817			, 			
BUSINES	S TELEPHONE NO.					entra a a a an esta	61 to 1	
(808) 440-	9109				TH	OFFICE	CLERK	
						UNIY OF	KAUAT	
PART I: T	OTAL EXPENDITURES						The section was	
X This	litures incurred by lobbyist for the purpose section is not applicable. enditures incurred in the total s Name of Recipient	um of \$25 or mor		ade for the f			ll sheet(s) if necessary.	Amount or Value
List all expend	TURES OF \$150 OR MORE F ditures incurred by lobbyist for the purposes section is not applicable. enditures incurred in the total s	ose of lobbying of \$15	0 or more per person pe			ach addition	nal sheet(s) if necessory.	
Duta	Name of Recipient	Mailing Addr	ess (Street, City, State	Zin)	Description of Expend	liture		Amount or Value
1/23/23	Nathaniel Kinney		ghtailing, Honolulu		Salary (3 hours x			195.75
12/26/23	Nathaniel Kinney	1311 Houg	ghtailing, Honolulu	, 9681/	Salary (1 hour x (05.1)		65.1
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PART II:	CONTRIBUTIONS					
List all cont 1987, as am	BUTIONS RECEIVED tributions received by lobbyist for the purpose of lobbying in the total seconded. Attach additional sheet(s) if necessary. is section is not applicable. ntributions in the total sum of \$25 or more per person we	im of \$25 or more per person during the statement period pursuant to Sec. 3 ere received from the following persons:	-6.5(c)(3), Kaua'i County Code			
Date	Name of Contributor	Mailing Address (Street, City, State, Zip)	Amount or Value			
PART III	I: SUBJECT AREAS OF LOBBYING					
	and/or administrative action supported or opposed during the state t, or contract management that was supported or opposed.	ement reporting period. Shall include title of bills, resolutions, and/or o	lescription of actions, permit,			
Support	for various construction projects in Kauai.					
		4				
PART IV	: AUTHORIZED PERSON					
Ronal	d Taketa	Free of June				
Name of	Authorized Person (First, Middle, Last)	Signature of Authorized Person				
Execu	tive Secretary Treasurer	1/17-/24				
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.