

# 24 JNN 12 A7 53

# OFFICE OF THE COUNTY CLERK COUNTY OF KAUAT



#### 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 31<sup>st</sup> of each year. NOTE THAT THIS IS A PUBLIC DOCUMENT.

# STATEMENT YEAR: 2023

DATE OF FILING 1/2/24	NAME OF LOI Micah-Seth N				
NAME OF PERSON OR ORGANIZ Ulupono Initiative	ATION YOU LOBBY F	OR (Do not a	bbreviate)		
BUSINESS MAILING ADDRESS 999 Bishop Street, Suite 1202	Street Honolulu, HI, 96813	City	State	Zip Code	
BUSINESS TELEPHONE NO. 808-544-8960					

### PART I: TOTAL EXPENDITURES

This section is not applicable.

#### **EXPENDITURES OF \$25 OR MORE PER PERSON PER DAY**

List all expenditures incurred by lobbyist for the purpose of lobbying of \$25 or more per person per day during the reporting period. Attach additional sheet(s) if necessary

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X

Expenditures incurred in the total sum of \$25 or more per day were made for the following persons:

Date	Name of Recipient Mailing Address (Street, City, State, Zip) Description of Expenditure		Description of Expenditure	Amount or Value	

#### **EXPENDITURES OF \$150 OR MORE PER PERSON PER DAY**

List all expenditures incurred by lobbyist for the purpose of lobbying of \$150 or more per person per day during the reporting period. Attach additional sheet(s) if necessary

This section is not applicable.

Expenditures incurred in the total sum of \$150 or more per day were made for the following persons:

Date	Name of Recipient	Mailing Address (Street, City, State, Zip)	Description of Expenditure	Amount or Value

## PART II: CONTRIBUTIONS

#### CONTRIBUTIONS RECEIVED

List all contributions received by lobbytst for the purpose of lobbying in the total sum of \$25 Gr more per person during the statement period pursuant to Sec. 3-6.5(c)(3), Koua'i County Code 1987. as amended. Attach additional sheet(s) if necessary



This section is not applicable.

Contributions in the total sum of \$25 or more per person were received from the following persons:

Date	Name of Contributor	Mailing Address (Street City, State, Zip)	Amount or Value	
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### PART III: SUBJECT AREAS OF LOBBYING

Legislative and/or administrative action supported or opposed during the statement reporting period Shall include title of bills, resolutions, and/or description of actions, permit, procurement, or contract management that was supported or apposed.

n/a			

## PART IV: AUTHORIZED PERSON

### Micah-Seth Kawika Munekata

Name of Authorized Person (First, Middle, Last)

# Dir. of Gov't Affairs

Title

Signature of Authorized Person

1/2/24

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.

06/24/16