

## 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.

2022 STATEMENT YEAR: JAN -9 A10:02 NAME OF LOBBYIST DATE OF FILING MICHAEL J. BELLES January 6, 2023 NAME OF PERSON OR ORGANIZATION YOU LOBBY FOR (Do not abbreviate) TOWER KAUAI LAGOONS LAND, LLC BUSINESS MAILING ADDRESS Street City State Zip Code 3135 Akahi Street, Suite A, Lihue, Kauai, Hawaii 96766 BUSINESS TELEPHONE NO. (808) 246-6961 PART I: TOTAL EXPENDITURES 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. This section is not applicable. Expenditures incurred in the total sum of \$25 or more per day were made for the following persons: Amount Mailing Address (Street, City, State, Zip) Description of Expenditure or Value Date Name of Recipient 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: Amount or Value Date Name of Recipient Mailing Address (Street, City, State, Zip) Description of Expenditure

PART 1	II: CONTRIBUTIONS			
List all co	RIBUTIONS RECEIVED Intributions received by lobbyist for the purpose of lobbusemended. Attach additional sheet(s) if necessary.	rying in the total sum of \$25 or more per person during the statement per	riod pursuant to Sec. 3-6.5(c)(3), Kaua'i County Code	
	This section is not applicable. Contributions in the total sum of \$25 or mor	e per person were received from the following persons:		
Date	Name of Contributor	Mailing Address (Street, City, State, Zip)	Amount or Value	
PART I	II: SUBJECT AREAS OF LOBBYING			
	e and/or administrative action supported or oppose ent, or contract management that was supported or opp	d during the statement reporting period. Shall include title of bills, losed.	resolutions, and/or description of actions, permit,	
BILL N	O. 2831			
Note: 7	The term "Expenditures" in Ordinance No. 99	9 does not include attorney's fees protected by the attorney	/-client privilege.	
(	Hawaii Rules of Professional Conduct, Rule	1.6)		
PART I	V: AUTHORIZED PERSON			
Micha	ael J. Belles		2000	
Name of Authorized Person (First, Middle, Last)		Signature of Autho	Signature of Authorized Person	
Attorney		1/5/		
<b>Title</b>		Date		
	EDMITICATION D. 1. 1. (1. 1			

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.