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LOBBYIST CONTRIBUTIONS AND EXPENDITURES STATEMENT

RECEIVED

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: 2021				°21 DEC 10	P4:17
DATE OF FILING 12-10-2021	NAME OF LOBBYIST Ryan Kobayashi				CI.
NAME OF PERSON OR ORGANIZATION Laborers' Union; Local 368	YOU LOBBY FOR (Do no	t abbreviate)		COUNTY OF	KAUA
BUSINESS MAILING ADDRESS 1617 Palama Street	Street City	State	Zip Code		
BUSINESS TELEPHONE NO. (808)841-5877 x242					
PART I: TOTAL EXPENDITURES			1		
EXPENDITURES OF \$25 OR MORE PE List all expenditures incurred by lobbyist for the purpo		ereon ner day during t	he reporting period. Attack addition	anal cheet(c) if necessary	
This section is not applicable. Expenditures incurred in the total su				nai sheesay y needsay.	
Date Name of Recipient	Mailing Address (Street, Ci	ty, State, Zip)	Description of Expenditure		Amount or Value
		3			
EXPENDITURES OF \$150 OR MORE P. List all expenditures incurred by lobbyist for the purpo		person per day during	the reporting period. Attach addit	ional sheet(s) if necessary.	
This section is not applicable. Expenditures incurred in the total su	um of \$150 or more per day	were made for the	a following persons:		
Date Name of Recipient	Mailing Address (Street, Ci		Description of Expenditure		Amount or Value
			1		

PART II: CONTRIBUTIONS			
1987, as amended. Attach additional sheet(s) if necessary This section is not applicable.	e of lobbying in the total sum of \$25 or more per person during the statement period pu y. or more per person were received from the following persons:	rsuant to Sec. 3-6.5(c)(3), Kaua'i County Code	
Date Name of Contributor	Mailing Address (Street, City, State, Zip)	Amount or Value	
	1617 Palama Street		
PART III: SUBJECT AREAS OF LOBBYI	NG		
egislative and/or administrative action supported or corocurement, or contract management that was supported	opposed during the statement reporting period. Shall include title of bills, resoludor opposed.	tions, and/or description of actions, permit,	
No lobbying activity in the County of Kauai	i in 2021		
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SHE			
	With the second		
PART IV: AUTHORIZED PERSON			
Ryan K. Kobayashi			
Name of Authorized Person (First, Middle, La	ast) Signature of Authorized	Person	
Former Government Affairs	() 12/10/	2021	
litle Citle	Date		

X

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.