## LOBBYIST CONTRIBUTIONS AND EXPENDITURES STATEMENT

The reporting period is from January 1<sup>st</sup> through December 31<sup>st</sup> 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: 2020

		A CONTRACTOR OF THE CONTRACTOR				DECEME	-		
DATE OF FILING NAME OF LOBBYIST						NELVEIVEL	į		
	1/29/2021 Eugene "Gino" Soquena								
	PERSON OR ORGANIZATION		FOR (Do not abb	reviate)					
Hawaii Building & Construction Trades Council 21 JAN 29 A10:08									
BUSINESS MAILING ADDRESS Street City State Zip Code									
735 Bishop Street, Suite 412 Honolulu, HI 96813									
BUSINESS TELEPHONE NO.									
8085242249 THE COUNTY CLERK						K			
	,				*	COUNTY OF KAUA	1		
PART I: TO	OTAL 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.									
X This	section is not applicable.								
Expe	enditures incurred in the total su	m of \$25 or mor	re per day were r	nade for the fo	llowing persons:				
~ .					D		Amount		
Date	Name of Recipient	Mailing Addr	ess (Street, City, Sta	te, Zip)	Description of Expenditure		or Value		
							_		
				2001					
	TURES OF \$150 OR MORE PE								
List all expend	litures incurred by lobbyist for the purpose	e of lobbying of \$15	0 or more per person	per day during th	e reporting period. Attach add	itional sheet(s) if necessary.			
X This section is not applicable.									
The same of the sa	enditures incurred in the total sur	m of \$150 or me	no non deu moro	made for the f	ollowing neveons:				
Expe	enditures incurred in the total sur	II 01 \$150 01 III	ore per day were	made for the r	collowing persons.		Amount		
Date	Name of Recipient	Mailing Addr	ess (Street, City, Sta	te, Zip)	Description of Expenditure		or Value		
	U-#-000					W. Company			

PART II: CONTRIBUTIONS				
1987, as amended. Attach additional sheet(s) if necessary.  This section is not applicable.	bying in the total sum of \$25 or more per person during the statement per re per person were received from the following persons:	eriod pursuant to Sec. 3-6.5(c)(3), Kaua'i County Code		
Date Name of Contributor	Mailing Address (Street, City, State, Zip)	Amount or Value		
PART III: SUBJECT AREAS OF LOBBYING  Legislative and/or administrative action supported or oppose procurement, or contract management that was supported or oppose N/A	ed during the statement reporting period. Shall include title of bills posed.	resolutions, and/or description of actions. permit,		
PART IV: AUTHORIZED PERSON		1		
Eugene Paul Soquena  Name of Authorized Person (First, Middle, Last)  Executive Director	Signature of Auth 1/29/2021	Person		
Title	Date	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.