


'21 SEP 16 P1:48

OFFICE OF
THE COUNTY CLERK
COUNTY OF KAUAI**LOBBYIST REGISTRATION STATEMENT**

You must file this statement with the Office of the County Clerk if you are an individual who for pay or other consideration engages in lobbying on behalf of another person, or organization, for more than five (5) hours in any month or spends more than \$750 lobbying during any reporting period (January 1st through December 31st of the previous year). NOTE THAT THIS IS A PUBLIC DOCUMENT.

<i>(Type or Print Clearly)</i>					
NAME	Last	First	Middle		
Oue, Evan K.					
BUSINESS MAILING ADDRESS	Street	City	State	Zip Code	
745 Fort Street Mall, 17thFloor, Honolulu, HI 96813					
TELEPHONE NO.	E-MAIL				
(808) 521-9500	eoue@imanaka-asato.com				
NAME OF PERSON OR ORGANIZATION YOU LOBBY FOR (do not abbreviate)					
Marriott Vacations Worldwide					
BUSINESS MAILING ADDRESS	Street	City	State	Zip Code	
9002 San Marco Court, Orlando, FL 32819					
BUSINESS TELEPHONE NO.					
(407) 460-0680					

SUBJECT AREAS OF LOBBYING
<i>(Bill/Resolution Number(s), Agenda Item(s), and/or Topic(s))</i>
Timeshare; Tourism & Recreation; Labor & Employment; Government Operations & Finance;
Consumer Protection & Commerce; Intergovernmental Relations; Culture, Arts, Historic
Preservation; Technology & Economic Development

CERTIFICATION OF LOBBYIST	
<i>I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.</i>	
	9/16/21
(Signature of Lobbyist)	(Date)

AUTHORIZATION TO LOBBY	
NAME	TITLE OF AUTHORIZING OFFICER OF PERSON REPRESENTED
Robin Suarez	Senior Vice President & Associate General Counsel
NAME OF ORGANIZATION (if applicable)	TELEPHONE NO.
Marriott Vacations Worldwide	(407) 460-0680
ADDRESS OF ORGANIZATION OR PERSON	Street City State Zip Code
9002 San Marco Court, Orlando, FL 32819	
<i>I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.</i>	
Robin L. Suarez	9/16/2021
Digitally signed by Robin L. Suarez Date: 2021.09.16 09:50:04 -04'00'	(Date)
(Signature of Authorizing Officer)	