NOTICE TO REQUESTER TO: Barbara Puakea Balatico (Requester's name) Hawaii County Office of the Clerk, Relley Araceley, 808-961-8429, FROM: relley.araceley@hawaiicounty.gov (Agency, and agency contact person's name, telephone number, & email address) DATE THAT THE RECORD REQUEST WAS RECEIVED BY AGENCY: June 24, 2022 DATE OF THIS NOTICE: July 7, 2022 GOVERNMENT RECORDS YOU REQUESTED (attach copy of request or provide brief description below): 1. Please submit a full list of all Hawaii State voters who have been removed from the voter rolls since the 2020 election. THIS NOTICE IS TO INFORM YOU THAT YOUR RECORD REQUEST: **◯** Will be granted in its entirety. Cannot be granted. Agency is unable to disclose the requested records for the following reason: Agency does not maintain the records. (HRS § 92F-3) Other agency that is believed to maintain records: Agency needs further clarification or description of the records requested. Please contact the agency and provide the following information: Request requires agency to create a summary or compilation from records, but requested information is not readily retrievable. (HRS § 92F-11(c)) Will be granted in part and denied in part, OR | Is denied in its entirety Although the agency maintains the requested records, it is not disclosing all or part of them based on the exemptions provided in HRS § 92F-13 and/or § 92F-22 or other laws cited below. (Describe the portions of records that the agency will not disclose.) RECORDS OR APPLICABLE **AGENCY** INFORMATION WITHHELD STATUTES JUSTIFICATION

REQUESTER'S RESPONSIBILITIES:

You are required to (1) pay any lawful fees and costs assessed; (2) make any necessary arrangements with the agency to inspect, copy or receive copies as instructed below; and (3) provide the agency any additional information requested. If you do not comply with the requirements set forth in this notice within 20 business days after the postmark date of this notice or the date the agency makes the records available, you will be presumed to have abandoned your request and the agency shall have no further duty to process your request. Once the agency begins to process your request, you may be liable for any fees and costs incurred. If you wish to cancel or modify your request, you must advise the agency upon receipt of this notice.

METHOD & TIMING OF DISCLOSURE:

Records available for public access in their entireties must be disclosed within a reasonable time, not to exceed 10 business days from the date the request was received, or after receipt of any prepayment required. Records not available in their entireties must be disclosed within 5 business days after this notice or after receipt of any prepayment required. HAR § 2-71-13(c). If incremental disclosure is authorized by HAR § 2-71-15, the first increment must be disclosed within 5 business days of this notice or after receipt of any prepayment required.

Metho	od of Disclosure:			
\boxtimes	Inspection at the following location: As requested, a copy of the record(s) will be provided in the following manner: Available for pick-up at the following location: Will be mailed to you. Will be transmitted to you by other means requested: request+khpphxsmte@foi.uipa.org			
Timin	ng of Disclosure: All records, or the first increment if applicable, will be made available or provided to you:			
	On, 20 After prepayment of 50% of fees and 100% of costs, as estimated below.			
For in	r incremental disclosures, each subsequent increment will be disclosed within 20 business days after: The prior increment (if one prepayment of fees is required and received), or Receipt of each incremental prepayment, if prepayment for each increment is required.			
Records will be disclosed in increments because the records are voluminous and the follow				
	extenuating circumstances exist: Agency must consult with another person to determine whether the record is exempt from disclosure under HRS chapter 92F.			
	Request requires extensive agency efforts to search, review, or segregate the records or otherwise prepare the records for inspection or copying.			
	Agency requires additional time to respond to the request in order to avoid an unreasonable interference with its other statutory duties and functions.			
	A natural disaster or other situation beyond agency's control prevents agency from responding to the request within 10 business days.			

ESTIMATED FEES & COSTS AND PAYMENT:

FEES: For personal record requests under Part III of chapter 92F, HRS, the agency may charge you for its costs only, and fee waivers do not apply.

For public record requests under Part II of chapter 92F, HRS, the agency is authorized to charge you fees to search for, review, and segregate your request (even if a record is subsequently found to not exist or will not be disclosed in its entirety). The agency must waive the first \$30 in fees assessed for general requesters, OR in the alternative, the first \$60 in fees when the agency finds that the request is made in the public interest. Only one waiver is provided for each request. See HAR §§ 2-71-19, -31 and -32.

COSTS: For either personal or public record requests, the agency may charge you for the costs of copying and delivering records in response to your request, and other lawful fees and costs.

PREPAYMENT: The agency may require prepayment of 50% of the total estimated fees and 100% of the total estimated costs prior to processing your request. If a prepayment is required, the agency may wait to start any search for or review of the records until the prepayment is received by the agency. Additionally, if you have outstanding fees or costs from previous requests, including abandoned requests, the agency may require prepayment of 100% of the unpaid balance from prior requests before it begins any search or review for the records you are now seeking.

	_	of what you must pay, based on the estimated fees and costs able waiver amount that will be deducted:	that the agency	
For pu	ublic record requests onl	<u>y</u> :		
Fees:	Search	Estimate of time to be spent: hours \$		
	Review & segregation	(\$2.50 for each 15-minute period) Estimate of time to be spent: hours \$		
	Fees waived	(\$5.00 for each 15-minute period) general (\$30), OR public interest (\$60) <\$>		
	Other	(Only one waiver per request) \$		
		(Pursuant to HAR §§ 2-71-19 & 2-71-31)		
	Total Estimated Fees:	\$	<u>0</u>	
For pu	ublic or personal record	requests:		
Costs:	Copying	Estimate of # of pages to be copied: \$ (@ \$ per page, pursuant to HRS § 92-21)		
	Delivery	Postage \$		
	Other	\$		
	Total Estimated Costs :	\$ 0		
TOTA	\$ 0			
	The estimated fees and costs above are for the first incremental disclosure only. Additional fees and costs, and no further fee waivers, will apply to future incremental disclosures.			
	PREPAYMENT IS REQ	UIRED (50% of fees + 100% of costs, as estimated above)	\$	
	UNPAID BALANCE FRO	OM PRIOR REQUESTS (100% must be paid before work begins)	\$	
TOTAL AMOUNT DUE AT THIS TIME				
	Payment may be made by:	cash personal check payable to other		
beginn record the re- questi	ning of this form. Please s of other agencies, and a cords. If the agency deni ons regarding complian	or the records being sought, please contact the agency person that the Office of Information Practices (OIP) does not a requester must seek records directly from the agency it belies or fails to respond to your written request for records or if note with the UIPA, then you may contact OIP at (Hotel Street, Suite 107, Honolulu, Hawaii 96813.	ot maintain the ieves maintains you have other	
		OIP (rev.	12/1/2015)	