

SUPREME COURT CLERK'S OFFICE 417 SOUTH KING STREET HONOLULU, HAWAI'I 96813-2912

FINANCIAL DISCLOSURE STATEMENT

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Electronically Filed Supreme Court SCFD-16-0000339 19-APR-2016 11:22 AM

Before completing this form please read the instructions for Financial Disclosure Statement, including the text of Supreme Court Rule 15. REMINDER: For all items requiring a monetary amount, the following financial range codes may be used.

- A Less than \$1,000
- B At least \$1,000 but less than \$10,000
- C At least \$10,000 but less than \$25,000
- D At least \$25,000 but less than \$50,000
- E At least \$50,000 but less than \$100,000
- F At least \$100,000 but less than \$150,000
- G At least \$150,000 but less than \$250,000 H - At least \$250,000 but less than \$500,000
- I At least \$500,000 but less than \$750,000
- J At least \$750,000 but less than \$1,000,000
- K -\$1,000,000 or more

TO BE FILED BY ALL FULL TIME AND PER DIEM JUDGES.

(Type or Print Clearly)					
_{NAME:} Domi	ngo	William	Michael	NAME OF SPO	USE OR DOMESTIC PARTNER:
(LAST)		(FIRST)	(MIDDLE)	Patricia Ca	arol Walsh-Domingo
1111 Alakea Street				No. of Depende	ent Children:
NUMBER, STREET				(Do not include	names)
CITY OR TOWN: Honolulu, HI ZIP CODE: 9			DE: 96813		
JUDICIAL POSITION	ON HELD	DATE OF APPOINTMENT	OFFICE PH	IONE	
District Judge	e, First Circuit	05/18/2015	(808) 538-5018		
CALENDAR YEAR	COVERED BY THIS DISCLOSU	RE: 20 <u>15</u>			
ITEM 1	JUDICIAL COMPENSATION	M			ANNUAL INCOME
RSCH 15(d)(1)	JUDICIAL COMPENSATION	V			G
ITEM 2 RSCH 15(d)(1)	JUDGE'S OTHER INCOME (if income for services rende				
EMPLOYER/LAW FIRM BUSINESS ADDRESS				ANNUAL INCOME	
The Law Offi	ce Of William M. Domii	ngo	547 Halekauwila Street, Suite 102		D
			Honolulu, HI 96813		
ITEM 3 RSCH 15(d)(1)					
		EMPLOYER			ANNUAL INCOME
Saint Francis Healthcare System				F	

ITEM 4 RSCH 15(d)(1)	ANY OTHER INCOME, FOR SERVICES RENDERED, IN EXCESS OF \$1,000 - INCOME DISCLOSED IN ITEMS 1 - 3 NEED NOT BE REPEATED HERE				
	SOURCE	NATURE	OF SERVICES REN	DERED	AMOUNT
<u> </u>	Check here if entry is None	Check here if you ha	ave attached addition	al sheets	
ITEM 5 RSCH 15(d)(2)	EACH OWNERSHIP OR BENEFICIAL IN VALUE OF \$5,000 OR MORE OR EQUA	ITEREST, HELD IN ANY L TO 10% OF THE OWN	' BUSINESS CARRYI NERSHIP OF THE BL	NG ON BUSINESS IN THE JSINESS.	STATE, HAVING A
	NAME OF BUSINESS	NATURE O	F BUSINESS	NATURE OF INTERES	T ENTER AMOUNT OR NO. OF SHARES
The Law Off	ice of William M. Domingo	Law Office		Owner	D
	Check here if entry is None	Check here if you ha	ave attached addition	al sheets	
ITEM 6 RSCH 15(d)(2)	OWNERSHIP OR BENEFICIAL INTEREST UNDER ITEM 5 TRANSFERRED DURING THIS DISCLOSURE PERIOD.			OD.	
	NAME OF BUSINESS	DATE OF	TRANSFER	VALUE OF	TRANSFER
<u> </u>	Check here if entry is None	Check here if you ha	ave attached addition	al sheets	
ITEM 7 RSCH 15(d)(3)	LIST EACH OFFICERSHIP, DIRECTORS	SHIP, TRUSTEESHIP O	R OTHER FIDUCIAR	Y RELATIONSHIP HELD IN	I ANY BUSINESS.
	NAME OF BUSINESS Check here if entry is None	☐ Check here if you h	TITLE AN	D TERM OF OFFICE	COMPENSATION (enter amount or NONE)

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	S, OTHER THAN CREDIT CARD ACCOUNTS, TO WHOM MORE THAN \$3,000 WAS OWED DURING THE DISCLOSURE REDIT CARD DEBT THAT EXCEEDED \$10,000 FOR SIX MONTHS OR MORE.				
NAME AND ADDRE Seneca Mortgage Servicing, 6		ORIGINAL AMOUNT OWED	AMOUNT OWED AT END OF YEAR		
Elma, NY 1409					
Hawaii State Federal Credit Ur	nion	E	E		
P.O. Box 3072 Honolulu,HI 9	6802-3072				
☐ Check here if entry is N	lone Check here	if you have attached additional sheets			
ITEM 9 REAL PROPERTY II	N THE STATE IN WHICH IS HELD A	N INTEREST WITH A FAIR MARKET VALU	E OF \$10,000 OR MORE.		
20047	POSTAL ZIP CODE OF LOCATIO	N	VALUE		
96817			K		
☐ Check here if entry is N	lone Check here	if you have attached additional sheets			
ITEM 10 REAL PROPERTY, RSCH 15(d)(5)	THE FAIR MARKET VALUE OF WHI	CH EXCEEDS \$10,000, ACQUIRED DURING	G THE DISCLOSURE PERIOD.		
POSTAL ZIP CODE OF LOCATION		E AND ADDRESS OF PERSON RECEIVING	G CONSIDERATION GIVEN		
	CON	SIDERATION			
☐ Check here if entry is None ☐ Check here if you have attached additional sheets					
ITEM 11 REAL PROPERTY, TRICKLY 15(d)(5)	THE FAIR MARKET VALUE OF WHI	CH EXCEEDS \$10,000, TRANSFERRED DU	JRING THE DISCLOSURE PERIOD.		
POSTAL ZIP CODE OF LOCATION	NAME AND ADDRESS OF PERS	ON FURNISHING CONSIDERATION	CONSIDERATION RECEIVED		
☐ Check here if entry is None ☐ Check here if you have attached additional sheets					

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ITEM 12 RSCH 15(d)(6)	CREDITOR INTEREST IN INSOLVENT BUSINESS HAVING A VALUE OF \$5,000 OR MORE.				
N	IAME OF BUSINESS	NATURE OF BUSINESS	NATURE OF INTEREST	VALUE	
∠ c	heck here if entry is None	Check here if you have attach	ed additional sheets		
ITEM 13 RSCH 15(d)(7); Rule 3.13 Revised Code of Judicial Conduct	GIFT(S) THAT MUST BE REPORTED UNDER RULE 3.13(c) OF THE HAWAI'I REVISED CODE OF JUDICIAL CONDUCT.				
	SOURCE	DESCRIPTION OF GIFT		ESTIMATED VALUE	
☑ c	heck here if entry is None	Check here if you have attach	ed additional sheets		
ITEM 14					
RSCH 15(d)(8) & 22(h)	FULL-TIME JUDGES' APPROVED	JUDICIAL EDUCATION			
I attended <u>1</u>	0.00 hours of Approved Judicia	al Education during the reporting pe	riod.		
REMARKS:					
See attached sheets.					
CERTIFICATION: I hereby certify that the above is a true, correct, and complete statement.					
SIGNATURE: /s/ William M. Domingo DATE: 04/19/2016					
NOTE: This f	iling is not valid without a signature.				

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