## **AMENDED** FINANCIAL DISCLOSURE STATEMENT



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

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**Electronically Filed Supreme Court** SCFD-11-0000222 10-FEB-2017 12:16 PM

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)

(FIRST)  1111 Alakea Street NUMBER, STREET  DATE OF APPOINTMENT 6/30/16	S. (MIDDLE)  ZIP CODE: HI  OFFICE PHONE  808-783-2	RAME OF SPOUSE OR IN Elaine E.  No. of Dependent Childre (Do not include names)  2	Kawashima
CIAL COMPENSATION		AN	INUAL INCOME <b>G</b>
MPLOYER/LAW FIRM	BUSINESS ADDRESS	1A	NNUAL INCOME
	ND DEPENDENT CHILDREN		
EMPLOYER		AN	NNUAL INCOME
Punahou School  IntrapriseTechKnowlogies, LLC			
	TITL Alakea Street NUMBER, STREET  DINOLUL  DATE OF APPOINTMENT 6/30/16  RED BY THIS DISCLOSURE: 2016  CIAL COMPENSATION  BE'S OTHER INCOME ome for services rendered exceeds \$1,000)  EMPLOYER/LAW FIRM  ME OF SPOUSE OR DOMESTIC PARTNER Alome for services rendered exceeds \$1,000)  EMPLOYER  Punahou Sc.	(FIRST) (MIDDLE)  1111 Alakea Street  NUMBER, STREET  DO DATE OF APPOINTMENT OFFICE PHONE  6/30/16 808-783-2  RED BY THIS DISCLOSURE: 2016  CIAL COMPENSATION  SE'S OTHER INCOME ome for services rendered exceeds \$1,000)  EMPLOYER/LAW FIRM BUSINESS ADDRESS  ME OF SPOUSE OR DOMESTIC PARTNER AND DEPENDENT CHILDREN ome for services rendered exceeds \$1,000)  EMPLOYER  Punahou School	Ima James (FIRST) (MIDDLE)  11111 Alakea Street NUMBER, STREET  DO DATE OF APPOINTMENT OFFICE PHONE 6/30/16 808-783-2432  RED BY THIS DISCLOSURE: 2016  CIAL COMPENSATION  SE'S OTHER INCOME ome for services rendered exceeds \$1,000)  EMPLOYER/LAW FIRM  ME OF SPOUSE OR DOMESTIC PARTNER AND DEPENDENT CHILDREN ome for services rendered exceeds \$1,000)  EMPLOYER  Punahou School

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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	NATURE OF SERVICES RENDERED		AMOUNT	
×	Check here if entry is None	Check here if you ha	ave attached additiona	I sheets		
ITEM 5 RSCH 15(d)(2)	EACH OWNERSHIP OR BENEFICIAL I VALUE OF \$5,000 OR MORE OR EQU	INTEREST, HELD IN ANY AL TO 10% OF THE OW	/ BUSINESS CARRYI NERSHIP OF THE BU	NG ON BUSINESS IN THE ISINESS.	STATE, HAVING A	
	NAME OF BUSINESS	NATURE O	F BUSINESS	NATURE OF INTERES	ENTER AMOUNT OR NO. OF SHARES	
					OK NO. OF OFWINE	
ITEM 6	Check here if entry is None  Check here if you have attached additional sheets					
RSCH 15(d)(2)	OWNERSHIP OR BENEFICIAL INTEREST UNDER ITEM 5 TRANSFERRED DURING THIS DISCLOSURE PERIOD.					
	NAME OF BUSINESS		DATE OF TRANSFER		VALUE OF TRANSFER	
<b>52</b> 1		<u> </u>				
ITEM 7						
RSCH 15(d)(3) LIST EACH OFFICERSHIP, DIRECTORSHIP, TRUSTEESHIP OR OTHER FIDUCIARY RELATIONSHIP HELD IN ANY BUSINESS.						
	NAME OF BUSINESS		TITLE ANI	D TERM OF OFFICE	COMPENSATION (enter amount or NONE)	
					,	
Check here if entry is None						

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ITEM 8 RSCH 15(d)(4)	LIST CREDITORS, C PERIOD. LIST CREE	THER THAN CREDIT CARD DIT CARD DEBT THAT EXCE	ACCOUNTS, TO WHOM MORE THAN \$3,000 WASEDED \$10,000 FOR SIX MONTHS OR MORE.	AS OWED DURING THE DISCLOSURE
	NAME AND ADDRES	SS OF CREDITOR	ORIGINAL AMOUNT OWED	AMOUNT OWED AT END OF YEAR
Green Tree	e 72, Rapid City,	SD 57709-6172	D	D
	Check here if entry is No	one Check	chere if you have attached additional sheets	
ITEM 9 RSCH 15(d)(5)	REAL PROPERTY IN	I THE STATE IN WHICH IS F	IELD AN INTEREST WITH A FAIR MARKET VALU	E OF \$10,000 OR MORE.
POSTAL ZIP CODE OF LOCATION			VALUE	
96825			I	
	Check here if entry is N	one L Chec	k here if you have attached additional sheets	
ITEM 10 RSCH 15(d)(5)	REAL PROPERTY, T	HE FAIR MARKET VALUE O	F WHICH EXCEEDS \$10,000, ACQUIRED DURIN	G THE DISCLOSURE PERIOD.
POSTAL ZIP C	CODE OF LOCATION	NATURE OF INTEREST	NAME AND ADDRESS OF PERSON RECEIVING CONSIDERATION	G CONSIDERATION GIVEN
Check here if entry is None Check here if you have attached additional sheets				
ITEM 11 RSCH 15(d)(5)	REAL PROPERTY, T	THE FAIR MARKET VALUE O	F WHICH EXCEEDS \$10,000, TRANSFERRED DI	JRING THE DISCLOSURE PERIOD.
POSTAL ZIP C	CODE OF LOCATION	NAME AND ADDRESS OF	PERSON 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	NAME OF BUSINESS NATURE OF BUSINESS NATURE OF INTEREST			VALUE	
<b>X</b> 0	theck 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	ITEM 13 RSCH 15(d)(7); Rule 3.13 Revised Code of Judicial  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	
<b>X</b>	Charle have if antruin Nana	Charle have if you have attach	ad additional about		
ITEM 14	Check here if entry is None	Check here if you have attach	ed additional sneets		
RSCH 15(d)(8) & 22(h)	FULL-TIME JUDGES' APPROVED	) JUDICIAL EDUCATION			
I attended hours of Approved Judicial Education during the reporting period.					
REMARKS:					
See attached sheets.					
CERTIFICATION: I hereby certify that the above is a true, correct, and complete statement.					
SIGNATURE: DATE:					
/s/ James S. Kawashima					
NOTE: This filing is not valid without a signature.					

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