



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

**FINANCIAL DISCLOSURE STATEMENT
(SHORT FORM)**

THIS SPACE FOR OFFICE USE ONLY

**Electronically Filed
Supreme Court
SCFD-11-0000292
29-APR-2014
01:57 PM**

INSTRUCTIONS

WHO SHOULD FILE THIS FORM: Supreme Court Rule 15 requires annual filings. Persons who filed the initial form (JUD 101) may satisfy this requirement by using this amendatory form.

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

(Type or Print Clearly)

NAME: <u>Viola</u> <u>Matthew</u> <u>John</u> (LAST) (FIRST) (MIDDLE)			NAME OF SPOUSE OR DOMESTIC PARTNER: Beverly M.H. Viola
OFFICE ADDRESS: <u>4675 Kapolei Parkway</u> NUMBER, STREET			
CITY OR TOWN: <u>Kapolei</u>		ZIP CODE: <u>96707</u>	No. of Dependent Children: <u>2</u> (Do not include names)
JUDICIAL POSITION: District/Family Court Judge	TERM OF OFFICE BEGAN: <u>08/26/2010</u>	ENDS: <u>08/25/2016</u>	OFFICE PHONE: 954-8009
CALENDAR YEAR COVERED BY THIS DISCLOSURE: <u>2013</u>			

Check either number 1 or 2. If you check number 2, provide the relevant information.

- I have no changes to report since my last filing.
- I have the following changes to report since my last filing:

ITEM# 1 Add Delete Change As follows:
Judicial Compensation Annual Income = G

ITEM# 5 Add Delete Change As follows:
TD Ameritrade Amount or No. of Shares = E
Comprehensive Financial Planning, Inc. (HI deferred comp.) is now called: Prudential Retirement
The Hartford Amount or No. of Shares = D

ITEM# 8 Add Delete Change As follows:
Marriott Ownership Resorts, Inc.
Department of Treasury

ITEM# 8 Add Delete Change As follows:
Hawaii State Federal Credit Union Amount Owed at End of Year = C

Check here if you have attached additional sheet(s).

FULL-TIME JUDGES' APPROVED JUDICIAL EDUCATION:
(RSCH 15(d)(8) & 22(h))

I attended 44.6 hours of Approved Judicial Education during the reporting period.

I have reviewed my previous Disclosure of Financial Interests Statement filed with the Supreme Court Clerk's Office and all succeeding amendments. I hereby certify that the information I have provided on this form is a true, correct, and complete statement of my currently reportable financial interests and that there have been no other changes in my reportable financial interests since my reports were filed.

Signature Matthew J. Viola

Date: 04/28/2014

<u>Item 8 – Add as Follows</u>		
Name and Address of Creditor	Original Amount Owed	Amount Owed At End Of Year
Honda Financial Services P.O. Box 60001 City of Industry, CA 91716-0001	D	D

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