

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

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FINANCIAL DISCLOSURE STATEMENT

Electronically Filed Supreme Court SCFD-11-0000267 17-APR-2013 07:55 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 \$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)							
	ME: Radius Kar		aren Marie		NAME OF SPOUSE OR DOMESTIC PARTNER:		
OFFICE ADDRESS: 4675 Kapolei Parkway			Russell R.K.Tellio  No. of Dependent Children: (Do not Include names)				
CITY OR TOWN:	Kapolei	ZIP CO	DE: 96707	•	, 		
JUDICIAL POSITION HELD DATE OF APPOINTMENT			OFFICE PHONE				
Family Court per diem July 2010			954-8000	954-8000			
CALENDAR YEAR	CALENDAR YEAR COVERED BY THIS DISCLOSURE: 2012						
ITEM 1 RSCH 15(d)(1)	JUDICIAL COMPENSATION				ANNUAL INCOME		
ITEM 2 RSCH 15(d)(1)							
State of H	EMPLOYER/LAW FIR awaii retirement	M	BUSINESS ADDRESS 201 Merchant Street, #1 Honolulu, Hawaii 9681		ANNUAL INCOME E		
ITEM 3 RSCH 15(d)(1)	INCOME OF SPOUSE OR DOMESTIC PARTNER AND DEPENDENT CHILDREN (if income for services rendered exceeds \$1,000)						
State of Hawaii retirement					ANNUAL INCOME  D		
Social Security					С		
	<u>.</u> .						

			ANY OTHER INCOME, FOR SERVICES RENDERED, IN EXCESS OF \$1,000 - INCOME DISCLOSED IN ITEMS 1 - 3 NEED NOT BE REPEATED HERE				
	SOURCE	NATURI	E OF SERVICES REN	DERED	AMOUNT		
	Check here if entry is None	Check here if you h	ave attached addition	al sheets	<u>.</u> .		
ITEM 5 RSCH 15(d)(2)	5 EACH OWNERSHIP OR BENEFICIAL INTEREST, HELD IN ANY BUSINESS CARRYING ON BUSINESS IN THE STATE, HAVING A						
	NAME OF BUSINESS	NATURE O	F BUSINESS	NATURE OF INTERES	ENTER AMOUNT OR NO. OF SHARES		
<u> </u>	☑ Check here if entry is None ☐ Check here if you have attached additional sheets						
ITEM 6 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		
☐ Check here if entry is None ☐ Check here if you			ave attached additions	al sheets			
ITEM 7 RSCH 15(d)(3)	LIST EACH OFFICERSHIP, DIRECTORSHIP, TRUSTEESHIP OR OTHER FIDUCIARY RELATIONSHIP HELD IN ANY BUSINESS.						
	NAME OF BUSINESS	☐ Check here if you ha	TITLE ANG	OTERM OF OFFICE	COMPENSATION (enter amount or NONE)		

ITEM 8 RSCH 15(d)(4)	LIST CREDITORS, ( PERIOD. LIST CRE	OTHER THAN CREDIT CARD ACCOUNTS, TO WHOM MORE THAN \$3,000 WAS OWED DURING THE DISCLOSURE EDIT CARD DEBT THAT EXCEEDED \$10,000 FOR SIX MONTHS OR MORE.			
	NAME AND ADDRE	SS OF CREDITOR	ORIGINAL AMOUNT OWED	AMOUNT OWED AT END OF YEAR	
<b>2</b> c	Check here if entry is N	lone	k here if you have attached additional sheets		
ITEM 9 RSCH 15(d)(5)	REAL PROPERTY I	N THE STATE IN WHICH IS H	ELD AN INTEREST WITH A FAIR MARKET VALU	E OF \$10,000 OR MORE.	
		POSTAL ZIP CODE OF LO	CATION	VALUE	
96734				J	
00.01					
	Check here if entry is N	one Check	k here if you have attached additional sheets		
ITEM 10 RSCH 15(d)(5)	REAL PROPERTY, T	HE FAIR MARKET VALUE OF	F WHICH EXCEEDS \$10,000, ACQUIRED DURING	G THE DISCLOSURE PERIOD.	
POSTAL ZIP CO	ODE 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	HE FAIR MARKET VALUE OF	WHICH EXCEEDS \$10,000, TRANSFERRED DL	IRING THE DISCLOSURE PERIOD.	
POSTAL ZIP CO	DDE OF LOCATION	NAME AND ADDRESS OF I	PERSON FURNISHING CONSIDERATION	CONSIDERATION RECEIVED	
☑ Che	eck here if entry is Nor	ne 🗌 Check	here if you have attached additional sheets		

ITEM 12 RSCH 15(d)(6)	CREDITOR INTEREST IN INSOLVENT BUSINESS HAVING A VALUE OF \$5,000 OR MORE.					
NAME OF BUSINESS		NATURE OF BUSINESS	NATURE OF INTEREST	VALUE		
<b>∠</b> 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	DESCRIPTI	ON OF GIFT	ESTIMATED VALUE		
<b>D</b> o	neck here if entry is None					
ITEM 14	leck riere ii endy 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.						
Hard Radial 4/14/13						
NOTE: This filling is not valid without a signature						