

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

FINANCIAL DISCLOSURE STATEMENT

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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.

			(1)	ype or Print Clearly)			
NAME:	Crabt	ree AST)	Jeffrey (FIRST)	Parker (MIC	DDLE)	NAME OF SPOUSE OR DOMESTIC PARTNER. Ann M. Bouslog	
OFFICE ADDRESS: 1111 Alakea Street, Sixth Division NUMBER, STREET CITY OR TOWN: Honolulu ZIF			NUMBER, STREET	CODE: 96813		No. of Dependent Children: (Do not include names)	
JUDICIAI	L POSITIO	DN HELD	DATE OF APPOINTMENT		OFFICE PH	IONE	
Circuit	Judge		11/25/2014	538-5880			
CALENDAR YEAR COVERED BY THIS DISCLOSURE: 20_15							
ITEM RSCH 15	TEM 1 RSCH 15(d)(1) JUDICIAL COMPENSATION						ANNUAL INCOME G
ITEM RSCH 15	2 5(d)(1)	JUDGE'S OTHER INCOME (if income for services rendered exceeds \$1,000)					
EMPLOYER/LAW FIRM Law Offices of Jeff Crabtree			М	BUSINESS ADDRESS P.O. Box 62074			ANNUAL INCOME D
X							
x							
x							
х	x						
ITEM RSCH 15	3 5(d)(1)	INCOME OF SPOUSE OR DOMESTIC PARTNER AND DEPENDENT CHILDREN (if income for services rendered exceeds \$1,000)					
Spouse	e		EMPLOYER PBR Hawa	aii			ANNUAL INCOME F
Dependent Child A Clarer			Claremont	ont McKenna College			В
Dependent Child B Misc			Misc				Α

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			
	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	NTEREST, HELD IN ANY AL TO 10% OF THE OWI	REST, HELD IN ANY BUSINESS CARRYING ON BUSINESS IN THE STATE, HAVING A D 10% OF THE OWNERSHIP OF THE BUSINESS.					
	NAME OF BUSINESS	NATURE O	F BUSINESS	NATURE OF INTEREST	ENTER AMOUNT OR NO. OF SHARES			
Law Offices	of Jeff Crabtree	law firm	law firm					
x Charles Sc	hwab	retirement acco	retirement accounts		F			
Х								
Х								
х								
	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 INTERE	ST UNDER ITEM 5 TRA	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 ha	Check here if you have attached additional sheets					
ITEM 7 RSCH 15(d)(3)								
	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)			
₩	oneck here if entry is None	□ Check here if you ha	ave attached addition	वा आस्टाड				

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ITEM 8 RSCH 15(d)(4)		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 ADDRES	SS OF CREDITOR		ORIGINAL AMOUNT OWED	AMOL	INT OWED AT END OF YEAR	
First Hawaiia	n Bank, Main Brar	nch, Honolulu		Е		Е	
Plaza Home Mortgage, 1 Corporate Dr, #360, Lake Zurich				1		1	
American Sav	vings Bank, PO Bo	ox 2300, Honolulu, HI	96804	F		F	
х							
Х							
х							
	Check here if entry is No	one Check	k here if	you have attached additional sheets			
ITEM 9 RSCH 15(d)(5)	REAL PROPERTY IN	THE STATE IN WHICH IS H	ELD AN	INTEREST WITH A FAIR MARKET VALU	E OF \$1	0,000 OR MORE.	
		POSTAL ZIP CODE OF LOG	CATION		VALUE		
96822						K	
Х							
Х							
X							
X							
х							
	Check here if entry is No	one Check	k here if	you have attached additional sheets			
ITEM 10 RSCH 15(d)(5)	REAL PROPERTY, T	HE FAIR MARKET VALUE O	F WHICH	HEXCEEDS \$10,000, ACQUIRED DURIN	G THE D	ISCLOSURE PERIOD.	
POSTAL ZIP C	ODE OF LOCATION	NATURE OF INTEREST		AND ADDRESS OF PERSON RECEIVING DERATION	CONSIDERATION GIVEN		
			CONSI	DERATION			
☐ Check here if entry is None ☐ Check here if you have attached additional sheets							
ITEM 11 REAL PROPERTY, THE FAIR MARKET VALUE OF WHICH EXCEEDS \$10,000, TRANSFERRED DURING THE DISCLOSURE PERIOD.							
POSTAL ZIP 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	AME OF BUSINESS	NATURE OF BUSINESS NATURE OF INTEREST		VALUE				
☐ Check here if entry is None ☐ Check here if you have attached additional sheets								
ITEM 13 RSCH 15(d)(7); Rule 3.13 Revised Code of Judicial Conduct	(d)(7); 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				
<u>✓</u> c	heck here if entry is None	Check here if you have attach	ed additional sheets					
ITEM 14 RSCH 15(d)(8) & 22(h)	RSCH 15(d)(8) FULL-TIME JUDGES' APPROVED JUDICIAL EDUCATION							
I attended 19.50 hours of Approved Judicial Education during the reporting period.								
REMARKS:								
1. Regarding Items 2 and 5 (other income earned), my old law firm is not performing any legal services, and is still in "wind down" mode. The income reported for the 2015 disclosure period is from two old cases, and was for work I did before I was sworn in as a judge.								
2. On 5/11/2016, I amended Item 5 of this statement, to include the brokerage which holds my deferred income/retirement accounts.								
☐ See attached sheets.								
CERTIFICATION: I hereby certify that the above is a true, correct, and complete statement.								
SIGNATURE: /s/ Jeffrey P. Crabtree (amending my 5/2/2016 Disclosure Statement) DATE: 05/11/2016								
NOTE: This filing is not valid without a signature.								

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