			THIS SPACE FO	ANCIAL DISCLOSURE STATEMENT THIS SPACE FOR OFFICE USE ONLY Electronically Filed Supreme Court SCFD-15-0000359 27-APR-2016 10:55 AM	
TO BE FILED BY	ALL FULL TIME AND PER DIEM JUDGES.	ype or Print Clearly)			
OFFICE ADDRESS CITY OR TOWN: JUDICIAL POSITIO District Famil	AST) (FIRST) S:		E) Joyce M. No. of Dependence (Do not inclue 2 OFFICE PHONE 961-7500		
ITEM 3 RSCH 15(d)(1) Department c Rehabilitation	INCOME OF SPOUSE OR DOMESTIC PARTNER AN (if income for services rendered exceeds \$1,000) EMPLOYER of Education Hospital of the Pacific	ND DEPENDENT CHILDREN		ANNUAL INCOME E B	

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	NATUR	E OF SERVICES RENI	DERED	AMOUNT		
	Check here if entry is None	Check here if you h	nave attached additiona	al sheets			
ITEM 5 RSCH 15(d)(2)							
	NAME OF BUSINESS	NATURE C	DF BUSINESS	NATURE OF INTERE	ST ENTER AMOUNT OR NO. OF SHARES		
	Check here if entry is None	Check here if you h	nave attached additiona	al sheets	I		
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 C	OF TRANSFER		
Check here if entry is None			have attached additional sheets				
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)		

ITEM 8 RSCH 15(d)(4)	LIST CREDITORS, O PERIOD. LIST CREE	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.				
Howe: N=4	NAME AND ADDRES	SS OF CREDITOR			AMOU	NT OWED AT END OF YEAR
Hawaii National Bank				G		G
	Check here if entry is N	one 🗌 Chec	k here if	you have attached additional sheets		
ITEM 9 RSCH 15(d)(5)	REAL PROPERTY IN	I THE STATE IN WHICH IS H	IELD AN	INTEREST WITH A FAIR MARKET VALU	E OF \$10),000 OR MORE.
		POSTAL ZIP CODE OF LO	CATION			VALUE
96720						н
96720						F
	Check here if entry is No	one 🗌 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	HEXCEEDS \$10,000, ACQUIRED DURIN	G THE DI	ISCLOSURE PERIOD.
POSTAL ZIP C	ODE OF LOCATION	NATURE OF INTEREST		AND ADDRESS OF PERSON RECEIVING	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 O	F WHICH	HEXCEEDS \$10,000, TRANSFERRED DU	JRING TH	HE DISCLOSURE PERIOD.
POSTAL ZIP C	ODE OF LOCATION	NAME AND ADDRESS OF	PERSO	N FURNISHING CONSIDERATION		CONSIDERATION RECEIVED
CI	neck here if entry is Nor	ne Chec	k 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			
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	GIFT(S) THAT MUST BE REPORTED UNDER RULE 3.13(c) OF THE HAWAI'I REVISED CODE OF JUDICIAL CONDUCT.						
	SOURCE	DESCRIPT	ESTIMATED VALUE				
Check here if entry is None							
ITEM 14 RSCH 15(d)(8) & 22(h)	FULL-TIME JUDGES' APPROVED JUDICIAL EDUCATION						

I attended <u>37.00</u> 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: /s/ Henry T. Nakamoto

DATE: 04/26/2016

NOTE: This filing is not valid without a signature.