

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

THIS SPACE FOR OFFICE USE ONLY

FINANCIAL DISCLOSURE STATEMENT

Electronically Filed Supreme Court SCFD-16-0000168 15-MAR-2016 10:53 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 \$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)						
NAME: Udo		Michael	Joseph	NAME OF SPO	DUSE OR DOMESTIC PARTNER:	
	LAST) PO Box 252	(FIRST)	(MIDDLE)	Irma M Im	nai	
OFFICE ADDRES	SS:	NUMBER, STREET		No. of Depend	No. of Dependent Children: (Do not include names)	
CITY OR TOWN: Papaikou ZIP		ZIP CC	DDE: 96781	0	0	
JUDICIAL POSIT	ION HELD	DATE OF APPOINTMENT	OFFI	ICE PHONE		
Per Diem Judge		03/02/2015	5 808 990-112		2	
CALENDAR YEAR COVERED BY THIS DISCLOSURE: 20_15						
ITEM 1	JUDICIAL COMPENSATION)N			ANNUAL INCOME	
RSCH 15(d)(1)	OBSIGNAL COINT ENGATION				D	
ITEM 2 RSCH 15(d)(1)	JUDGE'S OTHER INCOMI (if income for services reno					
EMPLOYER/LAW FIRM			BUSINESS ADDRES	1	ANNUAL INCOME	
University of Hawaii			200 W. Kawili St., Hilo HI 967	20	В	
				Vinnes		
ITEM 3 RSCH 15(d)(1)	INCOME OF SPOUSE OR (if income for services rend	DOMESTIC PARTNER AN ered exceeds \$1,000)	ND DEPENDENT CHILDREN			
		EMPLOYER			ANNUAL INCOME	
				and contains the		
				a 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4		
				TO THE		
				-		
				a history as		

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 REN	DERED	AMOUNT
Z ·	Check here if entry is None	Check here if you I	nave attached addition	al sheets	
ITEM 5 RSCH 15(d)(2)	EACH OWNERSHIP OR BENEFICIAL VALUE OF \$5,000 OR MORE OR EQU	INTEREST, HELD IN AN IAL TO 10% OF THE OW	Y BUSINESS CARRYI INERSHIP OF THE BL	NG ON BUSINESS IN THE ISINESS.	E STATE, HAVING A
	NAME OF BUSINESS	NATURE (DF BUSINESS	NATURE OF INTERES	ENTER AMOUNT OR NO. OF SHARES
Ø.	Check here if entry is None	Check here if you h	nave attached additiona	al 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
☑ (heck here if entry is None Check here if you have attached additional sheets				
ITEM 7 RSCH 15(d)(3)	LIST EACH OFFICERSHIP, DIRECTORSHIP, TRUSTEESHIP OR OTHER FIDUCIARY RELATIONSHIP HELD IN ANY BUSINESS.				
Onomea Fed	NAME OF BUSINESS eral CU		President-Board	of Directors	COMPENSATION (enter amount or NONE) None
	check here if entry is None	Check here if you h	ave attached additiona	l sheets	

	LIST CREDITORS, OTHER THAN CREDIT CARD ACCOUNTS, TO WHOM MORE THAN \$3,000 WAS OWED DURING THE DISCLOSURE PERIOD. LIST CREDIT CARD DEBT THAT EXCEEDED \$10,000 FOR SIX MONTHS OR MORE.					
NAME AND First Hawaiian Bank	ADDRESS OF CREDITOR	ORIGINAL AMOUNT OWED	AMOUNT OWED AT END OF YEAR H			
2339 Kamehameha Hw	y. Honolulu HI 96819					
Bank of America		Н	Н			
PO Box 5459 Mt. Laurel	NJ 08054					
Onomea FCU		С	С			
PO Box 19, Papaikou H	I 96781					
Check here if entry is None Check here if you have attached additional sheets						
ITEM 9 REAL PROF	PERTY IN THE STATE IN WHICH IS HELD	AN INTEREST WITH A FAIR MARKET VALU	E OF \$10,000 OR MORE.			
	POSTAL ZIP CODE OF LOCATION	ON	VALUE			
96720			1			
96781		:	Н			
		:				
		:				
☐ Check here if a	entry is None	e if you have attached additional sheets				
ITEM 10 REAL PROF	PERTY, THE FAIR MARKET VALUE OF WH	IICH EXCEEDS \$10,000, ACQUIRED DURING	G THE DISCLOSURE PERIOD.			
POSTAL ZIP CODE OF LOCATION NATURE OF INTEREST NAME AND ADDRESS OF PERSON RECEIVING CONSIDERATION GIVE						
☑ Check here if entry is None ☐ Check here if you have attached additional sheets						
ITEM 11 RSCH 15(d)(5) 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 RECE						
☑ Check here if entry is None ☐ 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.				
N	AME OF BUSINESS	NATURE OF BUSINESS NATURE OF INTEREST		VALUE	
	·				

☑ 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	DESCRIPTION	ON OF GIFT	ESTIMATED VALUE	
		4			
✓ cr	heck here if entry is None	Check here if you have attache	ed additional sheets		
ITEM 14	, , , , , , , , , , , , , , , , , , , ,	23 Greek refer in your native distance.	ad duditional sheets		
RSCH 15(d)(8) & 22(h)	FULL-TIME JUDGES' APPROVED	JUDICIAL EDUCATION			
I attended <u>0.00</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/ Michael J. Udovic Mulal V. Michael J. Udovic					
NOTE: This filing is not valid without a signature.					