



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

FINANCIAL DISCLOSURE STATEMENT

THIS SPACE FOR OFFICE USE ONLY

**Electronically Filed
 Supreme Court
 SCFD-15-0000370
 18-APR-2018
 11:01 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)

<p>NAME: <u>Albu</u> <u>Ronald</u> <u>Aurel</u> <small>(LAST) (FIRST) (MIDDLE)</small></p> <p>OFFICE ADDRESS: <u>1111 Alakea</u> <small>NUMBER, STREET</small></p> <p>CITY OR TOWN: <u>Honolulu</u> ZIP CODE: <u>96813</u></p>	<p>NAME OF SPOUSE OR DOMESTIC PARTNER: Kathryn Momi Albu</p> <p>No. of Dependent Children: <small>(Do not include names)</small> 0</p>
--	---

JUDICIAL POSITION HELD	DATE OF APPOINTMENT	OFFICE PHONE
Per Diem Judge Honolulu Dist Ct	January 14, 2014	(808) 538-5767

CALENDAR YEAR COVERED BY THIS DISCLOSURE: 20 17

ITEM	DESCRIPTION	ANNUAL INCOME
1 RSCH 15(d)(1)	JUDICIAL COMPENSATION	D
2 RSCH 15(d)(1)	JUDGE'S OTHER INCOME <small>(if income for services rendered exceeds \$1,000)</small>	
	EMPLOYER/LAW FIRM	BUSINESS ADDRESS
	Albu & Albu	220A S Kalaheo Ave, Kailua, HI 96734
		ANNUAL INCOME
		B
3 RSCH 15(d)(1)	INCOME OF SPOUSE OR DOMESTIC PARTNER AND DEPENDENT CHILDREN <small>(if income for services rendered exceeds \$1,000)</small>	
	EMPLOYER	ANNUAL INCOME
	Retired	

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 RENDERED (not for services rendered)	AMOUNT D
Social Security		

Check here if entry is None Check here if you have attached additional sheets

ITEM 5 RSCH 15(d)(2)	EACH OWNERSHIP OR BENEFICIAL INTEREST, HELD IN ANY BUSINESS CARRYING ON BUSINESS IN THE STATE, HAVING A VALUE OF \$5,000 OR MORE OR EQUAL TO 10% OF THE OWNERSHIP OF THE BUSINESS.
-------------------------	--

NAME OF BUSINESS	NATURE OF BUSINESS	NATURE OF INTEREST	ENTER AMOUNT OR NO. OF SHARES
Ronald and Kathryn Albu	Apartment rental	Owners	Value = F

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 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 AND TERM OF OFFICE	COMPENSATION (enter amount or NONE)

Check here if entry is None Check here if you have attached additional sheets

ITEM 8 RSCH 15(d)(4)	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 ADDRESS OF CREDITOR	ORIGINAL AMOUNT OWED	AMOUNT OWED AT END OF YEAR
	Chase, PO Box 15123, Wilmington, DE 19850-5123	E	A
	Bank of America, PO Box 982235, El Paso, TX 6998	F	C
	Central Pacific Bank, PO Box 3590, Honolulu, HI 96811	C	A
	Wells Fargo Bank, NA, PO Box 14411, Des Moines, IA 5030	H	A

Check here if entry is None

Check here if you have attached additional sheets

ITEM 9 RSCH 15(d)(5)	REAL PROPERTY IN THE STATE IN WHICH IS HELD AN INTEREST WITH A FAIR MARKET VALUE OF \$10,000 OR MORE.	
	POSTAL ZIP CODE OF LOCATION	VALUE
	96734	K

Check here if entry is None

Check here if you have attached additional sheets

ITEM 10 RSCH 15(d)(5)	REAL PROPERTY, THE FAIR MARKET VALUE OF WHICH EXCEEDS \$10,000, ACQUIRED DURING THE DISCLOSURE PERIOD.			
	POSTAL ZIP CODE OF LOCATION	NATURE OF INTEREST	NAME AND ADDRESS OF PERSON RECEIVING CONSIDERATION	CONSIDERATION GIVEN

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 RECEIVED
	96734	Matthew Aaron Greene and Juliann Boyce Greene, 220A S Kalaheo Ave, Kailua, HI 96734	K

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.

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 HAWAII REVISED CODE OF JUDICIAL CONDUCT.

SOURCE	DESCRIPTION OF GIFT	ESTIMATED VALUE

Check here if entry is None

Check here if you have attached additional sheets

ITEM 14
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.

SIGNATURE: /s/ Ronald A. Albu

DATE: April 18, 2018

NOTE: This filing is not valid without a signature.