A - Less than \$1,000 B - At least \$1,000 but less than \$25,000 B - At least \$1,000 but less than \$10,000 G - At least \$150,000 but less than \$25,000 B - At least \$10,000 but less than \$50,000 G - At least \$150,000 but less than \$50,000 B - At least \$10,000 but less than \$50,000 G - At least \$150,000 but less than \$50,000 B - At least \$10,000 but less than \$50,000 G - At least \$150,000 but less than \$50,000 B - At least \$10,000 but less than \$50,000 G - At least \$150,000 but less than \$50,000 B - At least \$10,000 but less than \$50,000 G - At least \$150,000 but less than \$50,000 B - At least \$10,000 but less than \$10,000 G - At least \$150,000 but less than \$50,000 B - At least \$10,000 but less than \$10,000 G - At least \$150,000 but less than \$50,000 B - At least \$100,000 but less than \$100,000 G - At least \$150,000 but less than \$10,000 B - At least \$100,000 but less than \$100,000 G - At least \$150,000 but less than \$1,000,000 B - At least \$100,000 but less than \$100,000 G - At least \$100,000 but less than \$1,000,000 B - At least \$100,000 but less than \$100,000 G - At least \$100,000 but less than \$10,000 B - At least \$100,000 but less than \$10,000 G - At least \$100,000 but less than \$10,000 B - At least \$100,000 but less than \$10,000 G - At least \$100,000 but less than \$10,000	FINANCIAL DISCLOSURE STATEMENT THIS SPACE FOR OFFICE USE ONLY Electronically Filed Supreme Court SCFD-13-0000230 12-MAR-2018 07:50 AM
(Type or Print Clearly)	
NAME: Cahill Peter T (LAST) (FIRST) (MIDDLE OFFICE ADDRESS: 2145 main Street, Courtroom 2 NUMBER, STREET CITY OR TOWN: Wailuku	NAME OF SPOUSE OR DOMESTIC PARTNER: Jessica B. No. of Dependent Children: (Do not include names)
JUDICIAL POSITION HELD DATE OF APPOINTMENT Circuit Court Judge 09/17/2012 808-2	OFFICE PHONE 244-2980
CALENDAR YEAR COVERED BY THIS DISCLOSURE: $20 \ \underline{17}$	
ITEM 1 RSCH 15(d)(1) JUDICIAL COMPENSATION	ANNUAL INCOME G
ITEM 2 JUDGE'S OTHER INCOME RSCH 15(d)(1) (if income for services rendered exceeds \$1,000)	
EMPLOYER/LAW FIRM BUSINESS ADD Peter T. Cahill P.O. Box 1652, Wailuku,	
ITEM 3 INCOME OF SPOUSE OR DOMESTIC PARTNER AND DEPENDENT CHILDREN (if income for services rendered exceeds \$1,000)	
EMPLOYER Maukele Transcribers, LLC	ANNUAL INCOME D

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						
Individuals NBI	SOURCE	NATURE OF SERVICES RENDERED Weddings Honorarium: Evidence Seminar			DERED	AMOUNT A A	
	Check here if entry is None			ave attached additiona			
ITEM 5 RSCH 15(d)(2)	EACH OWNERSHIP OR BENEFICIAL VALUE OF \$5,000 OR MORE OR EQU					ATE, HAVING A	
	NAME OF BUSINESS		NATURE O	FBUSINESS	NATURE OF INTEREST	ENTER AMOUNT OR NO. OF SHARES	
MetLife			Life Insurance		Stockholder	10	
Boeing			Defense Contra	actor	Stockholder	200	
Oracle			Software		Stockholder	600	
Cisco	Lisco .			I/Software	Stockholder	150	
Microsoft			Software		Stockholder	200	
	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 INTER	ESTU	JNDER ITEM 5 TRAN	ISFERRED DURING	THIS DISCLOSURE PERIOD.		
	NAME OF BUSINESS		DATE OF TRANSFER		VALUE OF TRANSFER		
	Check here if entry is None		Check here if you ha	ave attached addition	al sheets		
ITEM 7 RSCH 15(d)(3)							
	NAME OF BUSINESS			TITLE AN	D 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, 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.					
NAME AND ADDRESS OF CREDITOR Bank of Hawaii, Kahului, HI 96732				ORIGINAL AMOUNT OWED	AMO	UNT OWED AT END OF YEAR F	
(Above is a home equity line of credit)							
	Check here if entry is No		ck here if vo	ou have attached additional sheets			
ITEM 9				TEREST WITH A FAIR MARKET V	ALUE OF \$10,	,000 OR MORE.	
RSCH 15(d)(5)		POSTAL ZIP CODE OF LOO	CATION			VALUE	
96793						К	
96768						Н	
	Check here if entry is No	one Chec	ck here if yc	ou have attached additional sheets			
ITEM 10 RSCH 15(d)(5)	REAL PROPERTY, T	HE FAIR MARKET VALUE OF	F WHICH E	EXCEEDS \$10,000, ACQUIRED DU	RING THE DIS	SCLOSURE PERIOD.	
	ODE OF LOCATION	NATURE OF INTEREST		ND ADDRESS OF PERSON RECE ERATION	IVING	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	F WHICH E	XCEEDS \$10,000, TRANSFERRE	D DURING TH	IE DISCLOSURE PERIOD.	
POSTAL ZIP C	ODE OF LOCATION	NAME AND ADDRESS OF I	PERSONF	FURNISHING CONSIDERATION		CONSIDERATION RECEIVED	
⊻ c	check here if entry is Nor	ne 🗌 Chec	ck here if yo	ou have attached additional sheets		1	

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	GIFT(S) THAT MUST BE REPORTED UNDER RULE 3.13(c) OF THE HAWAII REVISED CODE OF JUDICIAL CONDUCT.						
	SOURCE	DESCRIPTI	ESTIMATED VALUE				
Check here if entry is None							
ITEM 14 RSCH 15(d)(8) & 22(h)							

I attended <u>31.00</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: Detu f. Cerkin

March 9, 2018

NOTE: This filing is not valid without a signature.

Other Beneficial Ownership Interests

Morgan Stanley 401K (Private pensions) and IRA accounts various

Account Value beginning Jan. 1, 2017: I Account Value ending Dec 31, 2017: J

Outrop Julin March 9.2018