| A - Less than \$<br>B - At least \$1,<br>C - At least \$1,<br>D - At least \$2;<br>E - At least \$50;<br>F - At least \$10; | ting this form please read the<br>ext of Supreme Court Rule 1<br>lowing financial range codes | G - At least \$150,000 bu<br>H - At least \$250,000 bu<br>I - At least \$500,000 bu<br>J - At least \$750,000 bu<br>J - At least \$750,000 bu<br>K -\$1,000,000 or more | REET<br>313-2912<br>isclosure Statement,<br>is requiring a monetary<br>ut less than \$250,000<br>it less than \$500,000<br>it less than \$750,000 | -                        | Electronically Filed<br>Supreme Court<br>SCFD-18-0000196<br>23-MAR-2018<br>01:43 PM |
|---|---|---|---|--------------------------|---|
|   |   | (Т  | ype or Print Clearly)   |                          |   |
| NAME: Larson Bruce (FIRST)<br>(LAST) (FIRST)<br>777 Kilauea Avenue  |   | Alan<br>(MIDDI  | E) NAME OF SPOUSE OR DOMESTIC PARTNER:  |                          |   |
| OFFICE ADDRESS:   |   |   | DE: 96720   |                          | include names)  |
| JUDICIAL POSITION HELD DATE OF APPOINTMENT   Per Diem Judge June 9, 2017  |   |   | 808   | OFFICE PHONE<br>747 7490 |   |
| CALENDAR YEAF   | R COVERED BY THIS DISCLOS   | URE: <b>20</b> <u>17</u>  |   |                          |   |
| ITEM 1<br>RSCH 15(d)(1)   | JUDICIALCOMPENSATIO   | DN  |   |                          | ANNUAL INCOME<br>B  |
| ITEM 2<br>RSCH 15(d)(1)   | JUDGE'S OTHER INCOM<br>(if income for services ren  |   |   |                          |   |
| None for Ser  | EMPLOYER/LAW FI   | RM  | BUSINESS AD   | DRESS                    | ANNUAL INCOME<br>A  |
| ITEM 3<br>RSCH 15(d)(1)   | INCOME OF SPOUSE OF<br>(if income for services ren  |   | D DEPENDENT CHILDREN  |                          |   |
| None for Ser  | vices Rendered  | EMPLOYER  |   |                          | ANNUAL INCOME<br>A  |

| ITEM 4<br>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  | DERED                  | AMOUNT                |   |  |  |
| Rental Incom                | ne - See Item 9.   | Rent  | tal   |                        |                       | С   |  |  |
| ND Minoral E                | Diabte   | Pov   | alty incomo                                       |                        |                       | В   |  |  |
| ND Mineral F                | Rights   | RUya  | alty income                                       |                        |                       | D   |  |  |
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| ITEM 5<br>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   | FBUSINESS              | NATURE OF INTERES     | T ENTER AMOUNT<br>OR NO. OF SHARES        |  |  |
|                             |  |   |   |                        |                       |   |  |  |
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| Check here if entry is None |  |   | Check here if you have attached additional sheets |                        |                       |   |  |  |
| ITEM 6<br>RSCH 15(d)(2)     | OWNERSHIP OR BENEFICIAL INTER  | RESTUR  | NDER ITEM 5 TRAN                                  | ISFERRED DURING        | THIS DISCLOSURE PERIO | DD.                                       |  |  |
|                             | NAME OF BUSINESS   |   | DATE OF TRANSFER                                  |                        | VALUE OF TRANSFER     |   |  |  |
|                             |  |   |   |                        |                       |   |  |  |
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| Check here if entry is None |  | Check here if you have attached additional sheets |   |                        |                       |   |  |  |
| ITEM 7<br>RSCH 15(d)(3)     | LIST EACH OFFICERSHIP, DIRECTORSHIP, TRUSTEESHIP OR OTHER FIDUCIARY RELATIONSHIP HELD IN ANY BUSINESS.   |   |   |                        |                       |   |  |  |
|                             | NAME OF BUSINESS   |   |   | TITLE AND              | D TERM OF OFFICE      | COMPENSATION<br>(enter amount or<br>NONE) |  |  |
|                             |  |   |   |                        |                       |   |  |  |
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|                             | Check here if entry is None  |   | Check here if you ha                              | ave attached additiona | l sheets              |   |  |  |

| ITEM 8<br>RSCH 15(d)(4)       | LIST CREDITORS, OTHER THAN CREDIT CARD ACCOUNTS, TO WHOM MORE THAN \$3,000 WAS OWED DURING THE DISCLOSURE<br>PERIOD. LIST CREDIT CARD DEBT THAT EXCEEDED \$10,000 FOR SIX MONTHS OR MORE. |                          |            |                                     |            |                         |
|-------------------------------|---|--------------------------|------------|-------------------------------------|------------|-------------------------|
|                               | NAME AND ADDRES   | IS OF CREDITOR           |            | ORIGINAL AMOUNT OWED                | AMOL       | JNT OWED AT END OF YEAR |
|                               | Check here if entry is No   | one 🗌 Chec               | ck here if | you have attached additional sheets | 1          |                         |
| ITEM 9<br>RSCH 15(d)(5)       | REAL PROPERTY IN  | THE STATE IN WHICH IS HI | ELD AN I   | NTEREST WITH A FAIR MARKET VALU     | E OF \$10, | 000 OR MORE.            |
| Principal Resi<br>Rental Home | idence - 96720<br>- 96720   | POSTAL ZIP CODE OF LO    | CATION     |                                     |            | VALUE<br>H<br>H         |
|                               | Check here if entry is No   | one 🗌 Chec               | ck here if | you have attached additional sheets |            |                         |
| ITEM 10<br>RSCH 15(d)(5)      | REAL PROPERTY, T  | HE FAIR MARKET VALUE OF  | F WHICH    | EXCEEDS \$10,000, ACQUIRED DURING   | G THE DIS  | SCLOSURE PERIOD.        |
| POSTAL ZIP CO                 | ODE OF LOCATION   | NATURE OF INTEREST       |            | AND ADDRESS OF PERSON RECEIVIN      | G          | CONSIDERATION GIVEN     |
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| ITEM 11<br>RSCH 15(d)(5)      | REAL PROPERTY, T  | HE FAIR MARKET VALUE OF  | FWHICH     | EXCEEDS \$10,000, TRANSFERRED DU    | JRING TH   | E DISCLOSURE PERIOD.    |
|                               | ODE OF LOCATION   |                          |            | I FURNISHING CONSIDERATION          |            | CONSIDERATION RECEIVED  |

| ITEM 12<br>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 |  |  |  |  |
|  |  |   |                    |       |  |  |  |  |
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| ITEM 13<br>RSCH 15(d)(7);<br>Rule 3.13<br>Revised Code<br>of Judicial<br>Conduct   | GIFT(S) THAT MUST BE REPORTED UNDER RULE 3.13(c) OF THE HAWAII REVISED CODE OF JUDICIAL CONDUCT. |   |                    |       |  |  |  |  |
|  | SOURCE   | DESCRIPTI   | ESTIMATED VALUE    |       |  |  |  |  |
|  |  |   |                    |       |  |  |  |  |
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| ITEM 14<br>RSCH 15(d)(8)<br>& 22(h)  | 15(d)(8) FULL-TIME JUDGES' APPROVED JUDICIAL EDUCATION   |   |                    |       |  |  |  |  |
| I attended 0 hours of Approved Judicial Education during the reporting period.   |  |   |                    |       |  |  |  |  |
| REMARKS:   |  |   |                    |       |  |  |  |  |
| Other than income earned as a Per Diem Judge, rental income, and mineral royalties disclosed above, our other<br>income consists of social security benefits and income from retirement, banking and brokerage accounts held<br>with various financial institutions. |  |   |                    |       |  |  |  |  |
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See attached sheets.

CERTIFICATION: I hereby certify that the above is a true, correct, and complete statement.

SIGNATURE: /s/ Bruce A. Larson

DATE: March 21, 2018

NOTE: This filing is not valid without a signature.