

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

FINANCIAL DISCLOSURE STATEMENT

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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)					
(T.P.A.	Lono	Jacob (MIDDLE)		OUSE OR DOMESTIC PARTNER:	
OFFICE ADDRESS: LOI No.				Louise R. Lee No. of Dependent Children: (Do not include names)	
Honolulu	ZIP COD	DE: 96813	0		
	DATE OF APPOINTMENT 06/10/2015				
R COVERED BY THIS DISCLOSU	re: 20 <u>17</u>				
JUDICIAL COMPENSATION	N			ANNUAL INCOME G	
	ered exceeds \$1,000)				
EMPLOYER/LAW FIRI	М	BUSINESS ADDRESS		ANNUAL INCOME N/A	
		D DEPENDENT CHILDREN			
Covert	EMPLOYER			ANNUAL INCOME E	
	Honolulu ON HELD I JUDGE COVERED BY THIS DISCLOSU JUDICIAL COMPENSATION JUDGE'S OTHER INCOME (if income for services rende EMPLOYER/LAW FIRI	Lono AST) (FIRST) 1111 Akakea Street S: NUMBER, STREET Honolulu ZIP COL ON HELD DATE OF APPOINTMENT t Judge 06/10/2015 R COVERED BY THIS DISCLOSURE: 20 17 JUDICIAL COMPENSATION JUDGE'S OTHER INCOME (if income for services rendered exceeds \$1,000) EMPLOYER/LAW FIRM INCOME OF SPOUSE OR DOMESTIC PARTNER AN (if income for services rendered exceeds \$1,000) EMPLOYER	LONO Jacob AST) (FIRST) (MIDDLE) S:	LONO AST) (FIRST) (MIDDLE) AST) (FIRST) (MIDDLE) LOUISE R. No. of Depenc (Do not include) 11111 Akakea Street No. of Depenc (Do not include) 2IP CODE: 96813 0 ON HELD DATE OF APPOINTMENT OFFICE PHONE 4 Judge 06/10/2015 06/10/2015 06 ON HELD JUDICIAL COMPENSATION JUDICIAL COMPENSATION JUDICIAL COMPENSATION BUSINESS ADDRESS INCOME OF SPOUSE OR DOMESTIC PARTNER AND DEPENDENT CHILDREN (If income for services rendered exceeds \$1,000) EMPLOYER INCOME OF SPOUSE OR DOMESTIC PARTNER AND DEPENDENT CHILDREN (If income for services rendered exceeds \$1,000) EMPLOYER	

SOURCE	NATURE	OF SERVICES BENI			
		OF SERVICES REN	DERED	AMOUNT	
Check here if entry is None	Check here if you ha	ave attached additiona	al sheets		
				ATE, HAVING A	
NAME OF BUSINESS	NATURE OI	F BUSINESS	NATURE OF INTEREST	ENTER AMOUNT OR NO. OF SHARES	
	Communication	าร	Stock	Е	
☐ Check here if entry is None ☐ Check here if you have attached additional sheets					
OWNERSHIP OR BENEFICIAL INTEREST UNDER ITEM 5 TRANSFERRED DURING THIS DISCLOSURE PERIOD.					
NAME OF BUSINESS	DATE OF	TRANSFER	VALUE OF T	RANSFER	
Check here if entry is None	Check here if you have attached additional sheets				
TEM 7 LIST EACH OFFICERSHIP, DIRECTORSHIP, TRUSTEESHIP OR OTHER FIDUCIARY RELATIONSHIP HELD IN ANY BUSINESS. RSCH 15(d)(3)					
NAME OF BUSINESS Check here if entry is None	Check here if you be			COMPENSATION (enter amount or NONE)	
	NAME OF \$5,000 OR MORE OR EQUAL NAME OF BUSINESS Check here if entry is None OWNERSHIP OR BENEFICIAL INTERE NAME OF BUSINESS Check here if entry is None LIST EACH OFFICERSHIP, DIRECTORS	EACH OWNERSHIP OR BENEFICIAL INTEREST, HELD IN ANY VALUE OF \$5,000 OR MORE OR EQUAL TO 10% OF THE OWN NAME OF BUSINESS NATURE OF Communication Communication Communication Communication Communication Communication NAME OF BUSINESS DATE OF Check here if you have computed the communication Commun	EACH OWNERSHIP OR BENEFICIAL INTEREST, HELD IN ANY BUSINESS CARRYIN VALUE OF \$5,000 OR MORE OR EQUAL TO 10% OF THE OWNERSHIP OF THE BUSINESS NAME OF BUSINESS Communications Check here if entry is None OWNERSHIP OR BENEFICIAL INTEREST UNDER ITEM 5 TRANSFERRED DURING NAME OF BUSINESS DATE OF TRANSFER Check here if entry is None Check here if you have attached additional decidence of the properties o	EACH OWNERSHIP OR BENEFICIAL INTEREST, HELD IN ANY BUSINESS CARRYING ON BUSINESS IN THE STAVALUE OF \$5,000 OR MORE OR EQUAL TO 10% OF THE OWNERSHIP OF THE BUSINESS. NAME OF BUSINESS NATURE OF BUSINESS NATURE OF BUSINESS NATURE OF INTEREST Communications NAME OF BUSINESS NATURE OF INTEREST Check here if entry is None Check here if you have attached additional sheets OWNERSHIP OR BENEFICIAL INTEREST UNDER ITEM 5 TRANSFERRED DURING THIS DISCLOSURE PERIOD. NAME OF BUSINESS DATE OF TRANSFER VALUE OF TI Check here if entry is None Check here if you have attached additional sheets LIST EACH OFFICERSHIP, DIRECTORSHIP, TRUSTEESHIP OR OTHER FIDUCIARY RELATIONSHIP HELD IN AN NAME OF BUSINESS TITLE AND TERM OF OFFICE	

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ITEM 8 RSCH 15(d)(4)			ACCOUNTS, TO WHOM MORE THAN \$3,000 WAS EDED \$10,000 FOR SIX MONTHS OR MORE.	S OWED DURING THE DISCLOSURE	
CENLAR, 42	NAME AND ADDRES	ss of creditor wing, New Jersey 0861	ORIGINAL AMOUNT OWED 8	AMOUNT OWED AT END OF YEAR	
Bank of Hawaii, 111 S. King Street, Honolulu, HI 96813			E		
	Check here if entry is No	one	k here if you have attached additional sheets		
ITEM 9 RSCH 15(d)(5)	REAL PROPERTY IN	THE STATE IN WHICH IS HE	ELD AN INTEREST WITH A FAIR MARKET VALUE	OF \$10,000 OR MORE.	
	I	POSTAL ZIP CODE OF LOC	CATION	VALUE	
96744				J	
-	Check here if entry is No		k here if you have attached additional sheets		
ITEM 10 RSCH 15(d)(5)	REAL PROPERTY, T	HE 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, T	HE FAIR MARKET VALUE OF	WHICH EXCEEDS \$10,000, TRANSFERRED DU	RING THE DISCLOSURE PERIOD.	
POSTAL ZIP C	ODE OF LOCATION	NAME AND ADDRESS OF F	PERSON FURNISHING CONSIDERATION	CONSIDERATION RECEIVED	
✓ Check here if entry is None Check here if you have attached additional sheets					

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ITEM 12 RSCH 15(d)(6)	CREDITOR INTEREST IN INSOLVENT BUSINESS HAVING A VALUE OF \$5,000 OR MORE.					
N	IAME OF BUSINESS	SS NATURE OF BUSINESS NATURE OF INTEREST VALUE				
<u> </u>	Check here if entry is None	Check here if you have attache	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 HAWAII REVISED CODE OF JUDICIAL CONDUCT.					
	SOURCE	DESCRIPTI	ON OF GIFT	ESTIMATED VALUE		
<u> </u>	Check here if entry is None	Check here if you have attache	ed additional sheets			
ITEM 14 RSCH 15(d)(8) & 22(h)	FULL-TIME JUDGES' APPROVED JUDICIAL EDUCATION					
I attended 21.0 hours of Approved Judicial Education during the reporting period.						
REMARKS:						
relivitatio.						
See attached sheets.						
CERTIFICATION: I hereby certify that the above is a true, correct, and complete statement.						
SIGNATURE: /s/ Lono J. Lee DATE: March 15, 2018						
NOTE: This filing is not valid without a signature.						

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