



**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-15-0000312  
 14-APR-2018  
 05:59 PM**

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>MONTALBANO</u> <u>John</u> <u>Alberto</u><br/> <small>(LAST) (FIRST) (MIDDLE)</small></p> <p>OFFICE ADDRESS: <u>700 Bishop Street Suite #2000</u><br/> <small>NUMBER, STREET</small></p> <p>CITY OR TOWN: <u>Honolulu</u> ZIP CODE: <u>96822</u></p> | <p>NAME OF SPOUSE OR DOMESTIC PARTNER:<br/><br/><b>None</b></p> <p>No. of Dependent Children:<br/>(Do not include names)<br/><br/><b>0</b></p> |
|--|--|

|                               |                     |              |
|-------------------------------|---------------------|--------------|
| JUDICIAL POSITION HELD        | DATE OF APPOINTMENT | OFFICE PHONE |
| Per Diem District Court Judge | 01/21/2015          | 808-535-8468 |

CALENDAR YEAR COVERED BY THIS DISCLOSURE: 20 17

|                       |                            |                        |
|-----------------------|----------------------------|------------------------|
| ITEM<br>RSCH 15(d)(1) | 1<br>JUDICIAL COMPENSATION | ANNUAL INCOME<br><br>C |
|-----------------------|----------------------------|------------------------|

|                       |  |  |
|-----------------------|--|--|
| ITEM<br>RSCH 15(d)(1) | 2<br>JUDGE'S OTHER INCOME<br>(if income for services rendered exceeds \$1,000) |  |
|-----------------------|--|--|

| EMPLOYER/LAW FIRM           | BUSINESS ADDRESS                       | ANNUAL INCOME |
|-----------------------------|--|---------------|
| Farrell & Associates        | 700 Bishop Street #2000, Honolulu, HI  | E             |
| United States Army Reserves | 230 R.T. Jones Road, Mountain View, CA | D             |

|                       |   |  |
|-----------------------|---|--|
| ITEM<br>RSCH 15(d)(1) | 3<br>INCOME OF SPOUSE OR DOMESTIC PARTNER AND DEPENDENT CHILDREN<br>(if income for services rendered exceeds \$1,000) |  |
|-----------------------|---|--|

| EMPLOYER | ANNUAL INCOME |
|----------|---------------|
|          |               |

|                         |   |
|-------------------------|---|
| 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 OF SERVICES RENDERED | AMOUNT |
|--------------|-----------------------------|--------|
| J.Montalbano | Consulting services         | B      |

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

|                         |  |
|-------------------------|--|
| 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 BUSINESS | NATURE OF INTEREST | ENTER AMOUNT OR NO. OF SHARES |
|------------------|--------------------|--------------------|-------------------------------|
|                  |                    |                    |                               |

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

|                         |  |
|-------------------------|--|
| ITEM 6<br>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<br>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<br>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<br>Great Lakes Educational Loan Services, Inc.<br><br>Madison, Wisconsin | ORIGINAL AMOUNT OWED<br>E  | AMOUNT OWED AT END OF YEAR<br>E |

Check here if entry is None

Check here if you have attached additional sheets

|                             |   |  |
|-----------------------------|---|--|
| ITEM 9<br>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   |  |

Check here if entry is None

Check here if you have attached additional sheets

|                             |  |  |                     |
|-----------------------------|--|--|---------------------|
| ITEM 10<br>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<br>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 |

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/ J. Montalbano

DATE: 04/15/2018

NOTE: This filing is not valid without a signature.