



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-11-0000292
 26-APR-2018
 04:16 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)

NAME: <u>Viola</u> <u>Matthew</u> <u>John</u> <small>(LAST) (FIRST) (MIDDLE)</small> OFFICE ADDRESS: <u>1111 Alakea Street</u> <small>NUMBER, STREET</small> CITY OR TOWN: <u>Honolulu</u> ZIP CODE: <u>96813</u>	NAME OF SPOUSE OR DOMESTIC PARTNER: <u>Beverly M.H. Viola</u> No. of Dependent Children: <small>(Do not include names)</small> <u>2</u>
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JUDICIAL POSITION HELD	DATE OF APPOINTMENT	OFFICE PHONE
Judge, First Circuit Court	12/20/2017	808 538-5870

CALENDAR YEAR COVERED BY THIS DISCLOSURE: 20 17

ITEM 1	JUDICIAL COMPENSATION	ANNUAL INCOME
RSCH 15(d)(1)		G

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

EMPLOYER/LAW FIRM	BUSINESS ADDRESS	ANNUAL INCOME

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

EMPLOYER	ANNUAL INCOME
Pediatric Physician's Group	Gross: H Net: G

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
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SOURCE	NATURE OF SERVICES RENDERED	AMOUNT

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.
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NAME OF BUSINESS	NATURE OF BUSINESS	NATURE OF INTEREST	ENTER AMOUNT OR NO. OF SHARES
Nationwide Life Ins.	Insurance	Life Insurance (2)	D
Oppenheimer	Financial Services	Ret. Account (2)	F
TD Ameritrade	Financial Services	Ret. Account	C
MML Invest. Services	Financial Services	Ret. Account	E
Prudential	Financial Services	Ret. Account	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.
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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.
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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 RSCH 15(d)(4)	8 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.																					
	<table border="1"> <thead> <tr> <th>NAME AND ADDRESS OF CREDITOR</th> <th>ORIGINAL AMOUNT OWED</th> <th>AMOUNT OWED AT END OF YEAR</th> </tr> </thead> <tbody> <tr> <td>Bank of Hawaii (Box 2715 Honolulu, HI 96803)</td> <td>K</td> <td>J</td> </tr> <tr> <td>Discover Card (Box 519089, Las Vegas, NV 90051)</td> <td>A</td> <td>B</td> </tr> <tr> <td>BofA Card (Box 851001, Dallas TX 75285)</td> <td>D</td> <td>C</td> </tr> <tr> <td>Honda Financial (Box 60001City of Industry CA 91716)</td> <td>C</td> <td>B</td> </tr> <tr> <td>Chase Bank Card (Box 6190, 6190 Sioux Falls, SD 57117)</td> <td>C</td> <td>B</td> </tr> <tr> <td>Barclays Bank Card (Box8803 Wilmington DE 19899)</td> <td>C</td> <td>C</td> </tr> </tbody> </table>	NAME AND ADDRESS OF CREDITOR	ORIGINAL AMOUNT OWED	AMOUNT OWED AT END OF YEAR	Bank of Hawaii (Box 2715 Honolulu, HI 96803)	K	J	Discover Card (Box 519089, Las Vegas, NV 90051)	A	B	BofA Card (Box 851001, Dallas TX 75285)	D	C	Honda Financial (Box 60001City of Industry CA 91716)	C	B	Chase Bank Card (Box 6190, 6190 Sioux Falls, SD 57117)	C	B	Barclays Bank Card (Box8803 Wilmington DE 19899)	C	C
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Barclays Bank Card (Box8803 Wilmington DE 19899)	C	C																				

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

ITEM RSCH 15(d)(5)	9 REAL PROPERTY IN THE STATE IN WHICH IS HELD AN INTEREST WITH A FAIR MARKET VALUE OF \$10,000 OR MORE.						
	<table border="1"> <thead> <tr> <th>POSTAL ZIP CODE OF LOCATION</th> <th>VALUE</th> </tr> </thead> <tbody> <tr> <td>96816</td> <td>K</td> </tr> <tr> <td>96707</td> <td>D</td> </tr> </tbody> </table>	POSTAL ZIP CODE OF LOCATION	VALUE	96816	K	96707	D
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96816	K						
96707	D						

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

ITEM RSCH 15(d)(5)	10 REAL PROPERTY, THE FAIR MARKET VALUE OF WHICH EXCEEDS \$10,000, ACQUIRED DURING THE DISCLOSURE PERIOD.								
	<table border="1"> <thead> <tr> <th>POSTAL ZIP CODE OF LOCATION</th> <th>NATURE OF INTEREST</th> <th>NAME AND ADDRESS OF PERSON RECEIVING CONSIDERATION</th> <th>CONSIDERATION GIVEN</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	POSTAL ZIP CODE OF LOCATION	NATURE OF INTEREST	NAME AND ADDRESS OF PERSON RECEIVING CONSIDERATION	CONSIDERATION GIVEN				
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Check here if entry is None Check here if you have attached additional sheets

ITEM RSCH 15(d)(5)	11 REAL PROPERTY, THE FAIR MARKET VALUE OF WHICH EXCEEDS \$10,000, TRANSFERRED DURING THE DISCLOSURE PERIOD.						
	<table border="1"> <thead> <tr> <th>POSTAL ZIP CODE OF LOCATION</th> <th>NAME AND ADDRESS OF PERSON FURNISHING CONSIDERATION</th> <th>CONSIDERATION RECEIVED</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>	POSTAL ZIP CODE OF LOCATION	NAME AND ADDRESS OF PERSON FURNISHING CONSIDERATION	CONSIDERATION RECEIVED			
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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.
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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
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I attended 33.50 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:



DATE:

4-26-18

NOTE: This filing is not valid without a signature.

Item 5 Cont'd:

Name of Business	Nature of Business	Nature of Interest	Enter Amount or No. of Shares
Brighthouse Fin.	Financial Services	Ret. Account	C
Scholars Edge	Financial Services	529 Plan	D
Prudential	Financial Services	Def. Comp.	G
John Hancock	Financial Services	Ret. Account	C
Mass Mutual	Financial Services	Ret. Account	F
Fidelity Investments	Financial Services	Invest. Account	G

Item 8 Cont'd:

Name and Address of Creditor	Original Amount Owed	Amount Owed At End Of Year
Citigroup Visa Card (Box 15298 Wilmington DE 19850)	C	B