



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-20-0000354  
05-MAY-2020  
08:16 AM**

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 SHOULD 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 only)

<p>NAME: <u>BUCKINGHAM</u> <u>GLORIA</u> <u>NAVARRO</u>  <small>(LAST) (FIRST) (MIDDLE)</small></p> <p>OFFICE ADDRESS: <u>360 HOOHANA STREET, SUITE A103</u>  <small>NUMBER, STREET</small></p> <p>CITY OR TOWN: <u>KAHULUI</u> ZIP CODE: <u>96732</u></p>	<p>NAME OF SPOUSE OR DOMESTIC PARTNER: <b>CHARLES BUCKINGHAM</b></p> <p>No. of Dependent Children: (Do not include names) <b>3</b></p>	
<p>JUDICIAL POSITION HELD <b>DISTRICT - PER DIEM</b></p>	<p>DATE OF APPOINTMENT <b>12/16/2019</b></p>	<p>OFFICE PHONE <b>(808) 873-5900</b></p>

CALENDAR YEAR COVERED BY THIS DISCLOSURE: 2019

ITEM RSCH 15(d)(1)	DESCRIPTION	ANNUAL INCOME						
1	JUDICIAL COMPENSATION	0						
2	JUDGE'S OTHER INCOME (if income for services rendered exceeds \$1,000)							
	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%;">EMPLOYER/LAW FIRM</th> <th style="width: 30%;">BUSINESS ADDRESS</th> <th style="width: 30%;">ANNUAL INCOME</th> </tr> </thead> <tbody> <tr> <td>NAVARRO-BUCKINGHAM, LLLC</td> <td>360 HOOHANA STREET, SUITE A103</td> <td style="text-align: center;">C</td> </tr> </tbody> </table>	EMPLOYER/LAW FIRM	BUSINESS ADDRESS	ANNUAL INCOME	NAVARRO-BUCKINGHAM, LLLC	360 HOOHANA STREET, SUITE A103	C	
EMPLOYER/LAW FIRM	BUSINESS ADDRESS	ANNUAL INCOME						
NAVARRO-BUCKINGHAM, LLLC	360 HOOHANA STREET, SUITE A103	C						
3	INCOME OF SPOUSE OR DOMESTIC PARTNER AND DEPENDENT CHILDREN (if income for services rendered exceeds \$1,000)							
	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 70%;">EMPLOYER</th> <th style="width: 30%;">ANNUAL INCOME</th> </tr> </thead> <tbody> <tr> <td>COLLIERS</td> <td style="text-align: center;">G</td> </tr> </tbody> </table>	EMPLOYER	ANNUAL INCOME	COLLIERS	G			
EMPLOYER	ANNUAL INCOME							
COLLIERS	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
NAVARRO-BUCKINGHAM, LLLC	LAW OFFICE	MEMBERSHIP INT.	100%

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)
NAVARRO-BUCKINGHAM, LLLC	MANAGER - 6 YEARS	NONE

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

ITEM 8 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	ORIGINAL AMOUNT OWED	AMOUNT OWED AT END OF YEAR	

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

ITEM 9 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  96708	VALUE  K		

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

ITEM 10 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 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 CREDITOR INTEREST IN INSOLVENT BUSINESS HAVING A VALUE OF \$5,000 OR MORE.  
RSCH 15(d)(6)

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 GIFT(S) THAT MUST BE REPORTED UNDER RULE 3. 13(c) OF THE HAWAII REVISED CODE OF JUDICIAL CONDUCT.  
RSCH 15(d)(7);  
Rule 3. 13  
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 FULL-TIME JUDGES' APPROVED JUDICIAL EDUCATION  
RSCH 15(d)(8)  
& 22(h)

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/ /GLORIA NAVARRO BUCKINGHAM/

DATE: 05/04/2020

NOTE: This filing is not valid without a signature.