N N N N N N N N N N N N N N N N N N N		EME COURT CLERK 417 SOUTH KING STRE DNOLULU, HAWAI'I 9681	ET	THIS SPACE FOR OFFICE USE ONLY Electronically Filed Supreme Court SCFD-11-0000239 22-APR-2020 09:30 AM		
A - Less ti B - At leas C - At leas D - At leas E - At leas F - At leas	mpleting this form please read ti the text of Supreme Court Rule he following financial range code han \$1,000 st \$1,000 but less than \$10,000 st \$10,000 but less than \$25,000 st \$25,000 but less than \$100,00 st \$100,000 but less than \$150,000 st \$100,000 but less than \$150,000 st \$100,000 but less than \$150,000 st \$100,000 but less than \$150,000	 15. REMINDER: For all items S SHOULD be used. G - At least \$150,000 but H - At least \$250,000 but J - At least \$500,000 but J - At least \$750,000 but G - At least \$750,000 but G - At least \$750,000 but J - At least \$750,000 but G -	s requiring a monetary t less than \$250,000 t less than \$500,000 less than \$750,000			
-		(Тур	be only)			
LOO		Laurel	K.S.	NAME OF SPO	USE OR DOMESTIC PARTNER:	
	LAST)	(FIRST)	(MIDDLE)	Clyde Fuji	kawa	
OFFICE ADDRES	4357 Rice Street, Su	ite 102		No. of Depende	ent Children:	
		MBER, STREET		(Do not include	names)	
CITY OR TOWN:	Lihue		96 7 66			
JUDICIAL POSITI		DATE OF APPOINTMENT	OF	FICE PHONE		
Per Diem, Fif		April 1		80863	2226 7	
		· · · · ·	·			
CALENDAR YEAI	R COVERED BY THIS DISCLOSURE	= 20 <u>19</u>				
ITEM 1 RSCH 15(d)(1)	JUDICIAL COMPENSATION				ANNUAL INCOME C	
ITEM 2 RSCH 15(d)(1)	JUDGE'S OTHER INCOME (if income for services rendered	ed exceeds \$1,000)				
McCorriston	EMPLOYER/LAW FIRM Miller Mukai MacKinnon		BUSINESS ADDRI 500 Ala Moana Blvd., Honol		ANNUAL INCOME G	
ITEM 3 RSCH 15(d)(1)						
	V-	EMPLOYER				
Self					E	

Page 1

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					
	SOURCE	N	ATURE OF SERVICES RI	ENDERED	AMOUNT	
	Check here if entry is None		ave attached additional sh			
ITEM 5 RSCH 15(d)(2)	EACH OWNERSHIP OR BENEFICIAL VALUE OF \$5,000 OR MORE OR EQU				ITE, HAVING A	
ITEM 6 RSCH 15(d)(2)	NAME OF BUSINESS Check here if entry is None OWNERSHIP OR BENEFICIAL INTER NAME OF BUSINESS	Check here if you h	ANSFERRED DURING THE	IIS DISCLOSURE PERIOD	ST ENTER AMOUNT OR NO. OF SHARES	
	Check here if entry is None	Check here if you h	nave attached additional st	neets		
ITEM 7 RSCH 15(d)(3)	LIST EACH OFFICERSHIP, DIRECTOR	RSHIP, TRUSTEESHIP C	R OTHER FIDUCIARY RE	ELATIONSHIP HELD IN ANY	ØUSINESS.	
NAME OF BUSINESS Kikiaola Land Co.		TITLE AND TE	TITLE AND TERM OF OFFICE COMPENSATION (enter amount or Note) or 0			
	Check here if entry is None		nave attached additional si	neets		

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		
Bank of Hawaii H			н		
Wells Fargo		н	Н		
Welle Fulge					
			·		
. <u> </u>		if you have attached additional sheets			
ITEM 9 RSCH 15(d)(5)	REAL PROPERTY IN THE STATE IN WHICH IS HELD A	N INTEREST WITH A FAIR MARKET VALUE OF \$1	0,000 OR MORE.		
	POSTAL ZIP CODE OF LOCATIO	N	VALUE		
96813			н		
96 7 66			L.		
98102			Н		
·					
	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 WHI	CH EXCEEDS \$10,000. ACQUIRED DURING THE I	DISCLOSURE PERIOD.		
POSTAL ZIP C	ODE OF LOCATION NATURE OF INTEREST	NAME AND ADDRESS OF PERSON RECEIVING	G 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 RECEIVE					
Check here if entry is None Check here if you have attached additional sheets					

ITEM 12 RSCH 15(d)(6)	CREDITOR INTEREST IN INSOLVEN	T BUSINESS HAVING A VALUE OF \$5,000 C	DR MORE.		
	NAME OF BUSINESS	NATURE OF BUSINESS	NATURE OF INTEREST	VALUE	
	Check here if entry is None	Check here if you have attached addit	ional sheets		
ITEM 13 RSCH 15(d)(7); Rule 3. 13 Revised Code of Judicial Conduct	13 15(d)(7); .13 GIFT(S) THAT MUST BE REPORTED UNDER RULE 3. 13(c) OF THE HAWAI'I REVISED CODE OF JUDICIAL CONDUCT. di Code cial				
	Check here if entry is None	Check here if you have attached addit	ional sheets		
ITEM 14 RSCH 15(d)(8) & 22(h)	RSCH 15(d)(8) FULL-TIME JUDGES' APPROVED JUDICIAL EDUCATION				
I attended	14 hours of Approved Judicial I	Education during the reporting period.			
REMARKS:	See attached sheets.				

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

SIGNATURE: /s/ Laurel Loo

DATE: April 19, 2020

NOTE: This filing is not valid without a signature.