

## SUPREME COURT CLERK'S OFFICE 417 SOUTH KING STREET HONOLULU, HAWAI'I 96813-2912

## FINANCIAL DISCLOSURE STATEMENT

THIS SPACE FOR OFFICE USE ONLY

**Electronically Filed Supreme Court** SCFD-18-0000362 15-APR-2020 09:22 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
- F At least \$100,000 but less than \$150,000
- E At least \$50,000 but less than \$100,000
- 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)										
NAME	Nakakuni		Florence		Toshie		NAME OF SPOUSE OR DOMESTIC PARTNER:			
INAIVIE.		LAST)		(FIRST)		(MIDDLE)				
OFFIC	E ADDRES	1111 Ala	kea Street					No. of Depende	ent Children:	
00		NUMBER, STREET						(Do not include	names)	
CITY OR TOWN:		Honolulu		ZII	IP CODE	96813		0		
JUDICI	AL POSITI	ON HELD		DATE OF APPOINTME	ENT		OFFICE PH	ONE		
Per Di	iem Jud	lge		Octo	ober 1	, 201 <b>7</b>		808 3 <b>7</b> 3-6906		
CALEN	IDAR YEAF	R COVERED BY TH	IS DISCLOSURE: 2	20 <u>19</u>						
ITEM	1	JUDICIAL COM	MPENSATION						ANNUAL INCOME	
.——	15(d)(1)								E	
ITEM RSCH	ITEM 2 RSCH 15(d)(1)  JUDGE'S OTHER INCOME (if income for services rendered exceeds \$1,000)									
		EMPLOYE	ER/LAW FIRM			BUSINESS ADDRESS			ANNUAL INCOME	
Unive	rsity of	Hawaii			2	2500 Campus Road, Hon. 96822			D	
Feder	al Pens	sion			;	300 Ala Moana Blvd., Hon. 96850			F	
ITEM	3	INCOME OF S	POUSE OR DOME	STIC PARTNER AN	ND DEP	ENDENT CHILDREN				
	15(d)(1)	INCOME OF SPOUSE OR DOMESTIC PARTNER AND DEPENDENT CHILDREN (if income for services rendered exceeds \$1,000)								
EMPLOYER					ANNUAL INCOME					
N/A										

SOURCE NATURE OF SERVICES RENDERED AMOUNT    Clock here if entry is Name	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						
ITEM   5   RSCH 19(4)(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   NATURE OF INTEREST   ENTER AMOUNT OR NO. OF SHARES      V   Check here if entry is None   Check here if you have attached additional sheets		SOURCE	1	NATURE OF SERVICES RE	ENDERED	AMOUNT		
NAME OF BUSINESS  NAME OF BUSINESS  NAME OF BUSINESS  NATURE OF BUSINESS  NATURE OF INTEREST  OR NO. OF SHARES  TEM 6 NEXT 15(4)(2)  OWNERSHIP OR BENEFICIAL INTEREST UNDER ITEM 5 TRANSFERRED DURING THIS DISCLOSURE PERIOD  NAME OF BUSINESS  DATE OF TRANSFER  VALUE OF TRANSFER  VALUE OF TRANSFER  VALUE OF TRANSFER  TEM 7 NEXT 15(4)(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)	<b>/</b> (	Check here if entry is None	Check here if you	nave attached additional sh	neets			
Check here if entry is None						ATE, HAVING A		
ITEM 7 RSCH 15(d)(3)  NAME OF BUSINESS  TITLE AND TERM OF OFFICE  COMPENSATION (enter amount or NONE)	ITEM 6	Check here if entry is None  OWNERSHIP OR BENEFICIAL INTER	Check here if you	nave attached additional sh ANSFERRED DURING TH	eets	OR NO. OF SHARES		
ITEM 7 RSCH 15(d)(3)  NAME OF BUSINESS  TITLE AND TERM OF OFFICE  COMPENSATION (enter amount or NONE)								
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							
(enter amount or NONE)	ITEM 7 RSCH 15(d)(3)  LIST EACH OFFICERSHIP, DIRECTORSHIP, TRUSTEESHIP OR OTHER FIDUCIARY RELATIONSHIP HELD IN ANY BUSINESS.							
✓ Check here if entry is None Check here if you have attached additional sheets			Charle base if you					

JUD 101 (01/2020) Page 2

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 Ame	rica	Н	Н				
Bank of Haw	aii	A	С				
Chase		Α	С				
	Check here if entry is None Check here if	you have attached additional sheets					
ITEM 9	REAL PROPERTY IN THE STATE IN WHICH IS HELD AN		10,000 OR MORE.				
RSCH 15(d)(5)	POSTAL ZIP CODE OF LOCATION		VALUE				
96821	1 00 // 12 // 00 //		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 C	ODE OF LOCATION NATURE OF INTEREST	NAME AND ADDRESS OF PERSON RECEIVIN	G CONSIDERATION GIVEN				
		SCHOOL LINE WITH COLUMN TO THE					
✓ Check here if entry is None Check here if you have attached additional sheets							
ITEM 11 REAL PROPERTY, THE FAIR MARKET VALUE OF WHICH EXCEEDS \$10,000, TRANSFERRED DURING THE DISCLOSURE PERIOD.							
RSCH 15(d)(5)							
POSTAL ZIP C	CONSIDERATION RECEIVED						
<b>/</b>	Check here if entry is None Check here if	you have attached additional sheets					

JUD 101 (01/2020) Page 3

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 addi	tional 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 HAWAI'I REVISED CODE OF JUDICIAL CONDUCT.						
	SOURCE	DESCRIPTION	N OF GIFT	ESTIMATED VALUE			
<b>V</b> 0	check here if entry is None	Check here if you have attached addi	itional sheets				
ITEM 14 RSCH 15(d)(8) & 22(h)	FULL-TIME JUDGES' APPROVED JU	DICIAL EDUCATION					
I attended hours of Approved Judicial 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/ Florence Toshie Nakakuni DATE: 4/15/2020							
NOTE: This filing is not valid without a signature.							

JUD 101 (01/2020) Page 4