

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

K -\$1,000,000 or more

G - At least \$150,000 but less than \$250,000

H - At least \$250,000 but less than \$500,000

J - At least \$750,000 but less than \$1,000,000

I - At least \$500,000 but less than \$750,000

## FINANCIAL DISCLOSURE STATEMENT

THIS SPACE FOR OFFICE USE ONLY

**Electronically Filed Supreme Court** SCFD-12-0000198 20-APR-2021 01:04 PM Dkt. 23 FDS

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

TO BE FILED BY ALL FULL TIME AND PER DIEM JUDGES.

(Type only)								
NAME:	Acoba		Edmund		Dean		NAME OF SPOUSE OR DOMESTIC PARTNER:	
	(I	LAST)	(FIRST)		(MIDDLE)			
OFFICE	ADDDES	ς. (	3970 Ka`ana Street, Suite 203				No. of Depende	ent Children:
OFFICE ADDRES		J	NUMBER, STREET				(Do not include	names)
CITY OR TOWN:		Lih	ue zı	IP CODE:	96766			
JUDICIA	L POSITIO	ON HE	LD DATE OF APPOINTME	ENT		OFFICE PHO	ONE	
District	Family	/ Co	urt Judge Ma	ay 27, 20				32-2391
CALEND	AR YEAR	COVI	ERED BY THIS DISCLOSURE: 2020					
ITEM RSCH 15	1	JUE	DICIAL COMPENSATION					ANNUAL INCOME
RSCH 1	o(d)(1)							G
ITEM RSCH 15	2 5(d)(1)	l	OGE'S OTHER INCOME ncome for services rendered exceeds \$1,000)					
EMPLOYER/LAW FIRM BUSINESS ADDRESS					ANNUAL INCOME			
ITEM	3		OME OF SPOUSE OR DOMESTIC PARTNER AN	ND DEPEN	IDENT CHILDREN			
RSCH 15	5(d)(1)	(if in	come for services rendered exceeds \$1,000)					
EMPLOYER O 1/2 I						ANNUAL INCOME		
Self-Employed Life Insurance Agent						D		

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		NATURE OF SERVICES RE	ENDERED	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 VALUE OF \$5,000 OR MORE OR EQU				ATE, HAVING A	
	NAME OF BUSINESS	NATU	RE OF BUSINESS	NATURE OF INTERE	EST ENTER AMOUNT OR NO. OF SHARES	
✓ Check here if entry is None						
ITEM 6 RSCH 15(d)(2)	OWNERSHIP OR BENEFICIAL INTER	EST UNDER ITEM 5 TR	ANSFERRED DURING TH	IIS DISCLOSURE PERIOD		
	NAME OF BUSINESS	DAT	E OF TRANSFER	VALUE	OF TRANSFER	
✓ Check here if entry is None						
ITEM 7 RSCH 15(d)(3)	ITEM 7 RSCH 15(d)(3)  LIST EACH OFFICERSHIP, DIRECTORSHIP, TRUSTEESHIP OR OTHER FIDUCIARY RELATIONSHIP HELD IN ANY BUSINESS.					
	NAME OF BUSINESS	Charle hars if		RM OF OFFICE	COMPENSATION (enter amount or NONE)	
	Check here if entry is None	Check here if you	have attached additional sh	neets		

JUD 101 (01/2020) Page 2

	ST CREDITORS, OTHER THAN CREDIT CARD ACCOUNTS, TO WHOM MORE THAN \$3,000 WAS OWED DURING THE DISCLOSURE ERIOD. LIST CREDIT CARD DEBT THAT EXCEEDED \$10,000 FOR SIX MONTHS OR MORE.					
NAME AND AL	DRESS OF CREDITOR	ORIGINAL AMOUNT OWED	AMOUNT OWED AT END OF YEAR			
Kauai Gayaramant Empla	yess Federal Credit Union					
2976 Ewalu Street, Lihue		В	В			
Garden Island FCU	111 30700		J			
2973 Kele Street, Lihue, I	HI 96766	С	В			
, ,						
Check here if ent	ry is None Check here if y	ou have attached additional sheets				
ITEM 9 REAL PROPE RSCH 15(d)(5)	RTY IN THE STATE IN WHICH IS HELD AN I	NTEREST WITH A FAIR MARKET VALUE OF \$	10,000 OR MORE.			
	POSTAL ZIP CODE OF LOCATION		VALUE			
2080 Manawalea Street, I	Jnit 303 Lihue, HI 96766		Н			
Check here if ent	v is None Check here if v	ou have attached additional sheets				
		EXCEEDS \$10,000. ACQUIRED DURING THE	DISCLOSURE PERIOD.			
RSCH 15(d)(5)		NAME AND ADDRESS OF PERSON RECEIVIN				
POSTAL ZIP CODE OF LOCAT		CONSIDERATION	G CONSIDERATION GIVEN			
✓ Check here if entry is None						
ITEM 11 REAL PROPERTY, THE FAIR MARKET VALUE OF WHICH EXCEEDS \$10,000, TRANSFERRED DURING THE DISCLOSURE PERIOD.						
POSTAL ZIP CODE OF LOCAT	CONSIDERATION RECEIVED					
✓ 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		
<b>~</b>	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	HAT MUST BE REPORTED UNDER RULE 3. 13(c) OF THE HAWAI'I REVISED CODE OF JUDICIAL CONDUCT.				
	SOURCE	DESCRIPTION	ESTIMATED VALUE			
		_				
	heck here if entry is None	Check here if you have attached addi	tional sheets			
ITEM 14 RSCH 15(d)(8) & 22(h)	FULL-TIME JUDGES' APPROVED JU	DICIAL EDUCATION				
I attended27.5 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/ Edmund Dean Acoba DATE:						
NOTE: This filing is not valid without a signature.						

JUD 101 (01/2020) Page 4