

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

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

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

FINANCIAL DISCLOSURE STATEMENT

THIS SPACE FOR OFFICE USE ONLY

Electronically Filed Supreme Court SCFD-11-0000190 14-FEB-2022 09:47 AM 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

- I At least \$500,000 but less than \$750,000 J - At least \$750,000 but less than \$1,000,000
- E At least \$50,000 but less than \$100,000 K -\$1,000,000 or more

F - At least \$100,000 but less than \$150,000

TO BE FILE	ED BY ALL FULL TIME AND PER DI	EM JUDGES.					
		(T	ype only)	•			
Chin	g	Jennifer	L.	NAME OF SPO	DUSE OR DOMESTIC PARTNER:		
	(LAST)	(FIRST)	(MIDDLE)				
OFFICE ADDRES	4675 Kapolei Parkw	ay UMBER, STREET		No. of Depende	ent Children:		
CITY OR TOWN:	Kapolei	UMBER, STREET	96707 ODE:	-	rialites)		
JUDICIAL POSITI	JUDICIAL POSITION HELD DATE OF APPOINTMENT OFFICE PHONE						
Family Court	Per Diem Judge	01/1	3/2021	808-95	808-954-8479		
CALENDAR YEAR	R COVERED BY THIS DISCLOSURE	=: 20 <u>21</u>					
ITEM 1 RSCH 15(d)(1)	JUDICIAL COMPENSATION				ANNUAL INCOME B		
ITEM 2 RSCH 15(d)(1)	JUDGE'S OTHER INCOME (if income for services render	red exceeds \$1,000)					
	EMPLOYER/LAW FIRM		BUSINESS A	ADDRESS	ANNUAL INCOME		
ITEM 3	INCOME OF SPOUSE OR D	OMESTIC PARTNER AND F	PEPENDENT CHILDREN				
RSCH 15(d)(1)	(if income for services render						
		EMPLOYER			ANNUAL INCOME		
					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 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 I VALUE OF \$5,000 OR MORE OR EQU					IE, HA	VING A	
ITEM 6 RSCH 15(d)(2)	Check here if entry is None OWNERSHIP OR BENEFICIAL INTER NAME OF BUSINESS		e if you h	ave attached additional she	IS DISCLOSURE PERIOD		ENTER AMOUNT OR NO. OF SHARES	
	No ali legge if gates in Naga		- if l					
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.								
	NAME OF BUSINESS	Chack hor	e if vou h		RM OF OFFICE		PENSATION 'amount or NONE)	
	✓ Check here if entry is None Check here if you have attached additional sheets							

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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 ADDRES	S OF CREDITOR		ORIGINAL AMOUNT OWED	AMC	OUNT 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	I THE STATE IN WHICH IS F	IELD AN INTER	REST WITH A FAIR MARKET VALUE	E OF \$10,000 OF	R MORE.		
		POSTAL ZIP CODE OF LC	CATION			VALUE		
	Check here if entry is No	one Che	ck here if you h	ave attached additional sheets				
ITEM 10 RSCH 15(d)(5)	REAL PROPERTY, T	HE FAIR MARKET VALUE C	F WHICH EXC	EEDS \$10,000. ACQUIRED DURING	G THE DISCLOS	URE PERIOD.		
POSTAL ZIP C	ODE OF LOCATION	NATURE OF INTEREST		E AND ADDRESS OF PERSON REC SIDERATION	CONSIDERATION GIVEN			
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.								
POSTAL ZIP CODE OF LOCATION NAME AND ADDRESS OF PERSON FURNISHING CONSIDERATION CONSIDERATION RE						CONSIDERATION RECEIVED		
	N							
√ C	Check here if entry is No	ne ⊢ Che	ck nere it vou ha	ave attached additional sheets				

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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	MUST BE REPORTED UNDER RULE 3. 13(c) OF THE HAWAI'I REVISED CODE OF JUDICIAL CONDUCT.						
	SOURCE	DESCRIPTIO	N OF GIFT	ESTIMATED VALUE				
	heck here if entry is None	Check here if you have attached addit	tional sheets					
ITEM 14 RSCH 15(d)(8) & 22(h)								
I attended hours of Approved Judicial Education during the reporting period.								
REMARKS: O	rder of Appointment filed 12/15/	2020.						
See attached sheets.								
CERTIFICATION: I hereby certiffy that the above is a true, correct, and complete statement.								
SIGNATURE: /s/ Jennifer L. Ching		DATE		02/14/2022				
NOTE: This filing is not valid without a signature.								

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