

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

FINANCIAL DISCLOSURE STATEMENT

THIS SPACE FOR OFFICE USE ONLY

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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.

			(T <u>)</u>	rpe only)			
NAME:	Gierlach		David	Joseph	NAME OF SP	NAME OF SPOUSE OR DOMESTIC PARTNER:	
		_AST)	(FIRST)	(MIDDLE)			
055105		720 North Kir	ng Street		No. of Depend	dent Children	
OFFICE	ADDRES	5:	NUMBER, STREET		(Do not include		
CITY OF	R TOWN:	Honolulu	ZIP CC	96817 DDE:			
JUDICIA	L POSITIO	ON HELD	DATE OF APPOINTMENT		OFFICE PHONE		
Per Die	em Fan	nily Court	Oct	2015	80884	8088452112	
CALENE	OAR YEAR	COVERED BY THIS DIS	closure: 20 <u>21</u>				
ITEM RSCH 1:	1 5(d)(1)	JUDICIAL COMPEN	SATION			ANNUAL INCOME	
	3(u)(1)					С	
ITEM RSCH 1	2 5(d)(1)	JUDGE'S OTHER IN (if income for service	NCOME es rendered exceeds \$1,000)				
EMPLOYER/LAW FIRM ST ELIZABETH'S EPISCOPAL CHURCH				BUSINESS AI 720 N. KING STREET, H	ANNUAL INCOME G		
31 ELI	IZADE	III S EFISCOFAL	CHUNCH	720 N. KING STREET, I	IONOLOLO 90017	G	
ITEM RSCH 15	3 5(d)(1)		SE OR DOMESTIC PARTNER AND D s rendered exceeds \$1,000)	EPENDENT CHILDREN			
			EMPLOYER			ANNUAL INCOME	

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
v (Check here if entry is None	Che	ck here if you ha	ave attached additional sho	eets		
ITEM 5 RSCH 15(d)(2)			NTEREST, HELD IN ANY BUSINESS CARRYING ON BUSINESS IN TH AL TO 10% OF THE OWNERSHIP OF THE BUSINESS.			STATE, HAVING A	
ITEM 6 RSCH 15(d)(2)	NAME OF BUSINESS Check here if entry is None OWNERSHIP OR BENEFICIAL INTER NAME OF BUSINESS		ck here if you ha ER ITEM 5 TRA	ave attached additional she			ENTER AMOUNT OR NO. OF SHARES
Check here if entry is None Check here if you have attached additional sheets							
ITEM 7 RSCH 15(d)(3)							
INSTITUTE OF HUMAN SERVICES				TITLE AND TE	TERM OF OFFICE D OF DIRECTORS		PENSATION amount or NONE) 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	AMOUN	NT OWED AT END OF YEAR	
DCU 220 DO	NALD LYNCH BL	VD MARLBOROUGH,	MA 01752	D		D	
AMERISAVE MORTGAGE CO, 1 CORPORATE DR, STE 360,				I		I	
	Check here if entry is No	one Chec	ck here if you h	ave attached additional sheets			
ITEM 9 RSCH 15(d)(5)	REAL PROPERTY IN	THE STATE IN WHICH IS H	IELD AN INTE	REST WITH A FAIR MARKET VALUE OF \$	10,000 OR M	IORE.	
		POSTAL ZIP CODE OF LO	CATION			VALUE	
96825						K	
	Check here if entry is No	one Chec	ck here if you h	ave attached additional sheets			
ITEM 10 RSCH 15(d)(5)	REAL PROPERTY, T	HE FAIR MARKET VALUE O	F WHICH EXC	CEEDS \$10,000. ACQUIRED DURING THE I	DISCLOSUR	RE PERIOD.	
POSTAL ZIP CODE OF LOCATION NATURE OF INTEREST NAME AND ADDRE				IE AND ADDRESS OF PERSON RECEIVING	3	CONSIDERATION GIVEN	
			OCIN	BIBLIVITION			
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 No	one Chec	ck here if you h	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	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 UNDER RULE 3. 13(c) OF THE HAWAI'I REVISED CODE OF JUDICIAL CONDUCT.							
	SOURCE	DESCRIPTIO	N OF GIFT	ESTIMATED VALUE				
	Check here if entry is None	Check here if you have attached addit	tional sheets					
ITEM 14 RSCH 15(d)(8) & 22(h)	FULL-TIME JUDGES' APPROVED JUDICIAL EDUCATION							
I attended	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	s/ DAVID GIERLACH		DATE:	1/11/22				
NOTE: This filing is not valid without a signature.								

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