

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-17-0000074 18-JAN-2022 12:12 PM **Dkt. 11 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
- 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: Goldbe | | g Robert | | Michael | NAME OF SPO | USE OR DOMESTIC PARTNER: | | |
| | | T) | (FIRST) | (MIDDLE) | Mary Cam | ela T. Goldberg | | |
| OFFICE ADDR | RESS. | 2970 Kele Street, Su | te 208 | | No. of Depende | nt Children: | | |
| NUMBER, STREET | | | | | (Do not include | (Do not include names) | | |
| CITY OR TOWN: Lihu'e ZIP CO | | ZIP CODI | 96766 | 4 | | | | |
| JUDICIAL POS | SITION I | HELD | DATE OF APPOINTMENT | 0 | FFICE PHONE | | | |
| Per Diem J | udge | | 12/01/ | 2016 | 5-4102 | | | |
| CALENDAR Y | EAR CC | VERED BY THIS DISCLOSURE: | 20 <u>21</u> | | | | | |
| ITEM 1 | J | UDICIAL COMPENSATION | | | | ANNUAL INCOME | | |
| RSCH 15(d)(1) | | | | | | С | | |
| ITEM 2 RSCH 15(d)(1) JUDGE'S OTHER INCOME (if income for services rendered exceeds \$1,000) | | | | | | | | |
| | | EMPLOYER/LAW FIRM | | BUSINESS ADDR | | ANNUAL INCOME | | |
| Law Office of Robert Goldberg LLLC 2970 kg | | | | 2970 Kele St., Ste. 208, Lih | nu'e, HI 96766 | G | | |
| Kaua'i Community College | | | | 3-1901 Kaumualii Hwy, Lih | 0 | | | |
| Dispute Prevention & Resolution, Inc. | | | | 1003 Bishop St. #1155, Ho | 0 | | | |
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| ITEM 3 RSCH 15(d)(1) INCOME OF SPOUSE OR DOMESTIC PARTNER AND DEPENDENT CHILDREN (if income for services rendered exceeds \$1,000) | | | | | | | | |
| EMPLOYER | | | | | | ANNUAL INCOME | | |
| Law Office of Robert Goldberg LLLC (spouse) | | | | | | В | | |
| Registered court interpreter (spouse) | | | | | Α | | | |
| Law Office of Robert Goldberg LLLC (child) | | | | | | В | | |
| Law Office of Robert Goldberg LLLC (child) | | | | | | В | | |
| Law Office of Robert Goldberg LLLC (child) | | | | | В | | | |
| | | | | | | | | |

| 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 RENDERED | | | AMOUNT | |
| Lewis and Cla | ark College (child) | Lab / | Assistant and | Orientation/Mentori | ng | | Α |
| | | | | | | | |
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| | | | | | | | |
| | Check here if entry is None | Ch | neck here if you h | ave attached additional sh | neets | | |
| ITEM 5 RSCH 15(d)(2) | EACH OWNERSHIP OR BENEFICIAL I VALUE OF \$5,000 OR MORE OR EQU | | | | | TE, HAV | 'ING A |
| | NAME OF BUSINESS | | NATUR | RE OF BUSINESS | NATURE OF INTERE | ST | ENTER AMOUNT OR NO. OF SHARES |
| Law Office of | Robert Goldberg LLLC | | Law Office | | Owner | | 100% |
| | | | | | | | |
| | | | | | | | |
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| | | | | | | | |
| | Check here if entry is None | Ch | neck here if you ha | ave attached additional sh | neets | | |
| ITEM 6 RSCH 15(d)(2) | OWNERSHIP OR BENEFICIAL INTER | EST UNI | DER ITEM 5 TRA | NSFERRED DURING TH | HIS DISCLOSURE PERIOD | | |
| | NAME OF BUSINESS | | DATE | DATE OF TRANSFER VALUE | | E OF TRANSFER | |
| N/A | | | | | | | |
| | | | | | | | |
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| | N | | | | | | |
| Check here if entry is None Check here if you have attached additional sheets | | | | | | | |
| 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 | | | | TITLE AND TERM OF OFFICE | | | ENSATION amount or NONE) |
| Jewish Community of Kauai (nonprofit) | | | Director (one year) | | | NONE | |
| | | | | | | | |
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| 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 O | WED | AMOUNT OWED AT END OF YEAR | | |
| | | | | | | | | |
| | | | | | | | | |
| / C | Check here if entry is No | one Che | ck here if you h | ave attached additional sheets | | | | |
| ITEM 9 RSCH 15(d)(5) | REAL PROPERTY IN | I THE STATE IN WHICH IS I | HELD AN INTE | REST WITH A FAIR MARKET V | ALUE OF \$10,00 | 00 OR MORE. | | |
| Kalaheo, HI 9 | 96741 (residence) | POSTAL ZIP CODE OF LC | CATION | | | VALUE J | | |
| | , | | | | | | | |
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| | | | | | | | | |
| | 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 | OF WHICH EXC | EEDS \$10,000. ACQUIRED DU | IRING THE DISC | CLOSURE PERIOD. | | |
| | ODE OF LOCATION | NATURE OF INTEREST | | E AND ADDRESS OF PERSON SIDERATION | RECEIVING | CONSIDERATION GIVEN | | |
| N/A | | | | | | | | |
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| | Check here if entry is None | | | | | | | |
| ITEM 11 RSCH 15(d)(5) REAL PROPERTY, THE FAIR MARKET VALUE OF WHICH EXCEEDS \$10,000, TRANSFERRED DURING THE DISCLOSURE PERIOD. | | | | | | | | |
| POSTAL ZIP C | ODE OF LOCATION | NAME AND ADDRESS (| OF PERSON FL | JRNISHING CONSIDERATION | | CONSIDERATION RECEIVED | | |
| N/A | | | | | | | | |
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| | | | | | | | | |
| | Check here if entry is No | one Che | ck here if vou 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 | NATURE OF INTEREST | VALUE | | | |
| N/A | | | | | | | |
| | | | | | | | |
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| ∠ C | heck 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 | ST BE REPORTED UNDER RULE 3. 13(c) OF THE HAWAI'I REVISED CODE OF JUDICIAL CONDUCT. | | | | | |
| | SOURCE | DESCRIPTION | N OF GIFT | ESTIMATED VALUE | | | |
| N/A | | | | | | | |
| | | | | | | | |
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| C C | heck here if entry is None | Check here if you have attached addit | ional sheets | | | | |
| ITEM 14 RSCH 15(d)(8) & 22(h) | H 15(d)(8) FULL-TIME JUDGES' APPROVED JUDICIAL EDUCATION | | | | | | |
| I attendedhours of Approved Judicial Education during the reporting period. | | | | | | | |
| REMARKS: No | on-required information (income an abundance of disclosure. | e for services rendered not exceedi | ng \$1,000, nonprofit directorshi | p, etc.) is provided out | | | |
| Item 14 is not applicable to per diem judges. See RSCH 15(d)(8) and 22(h). | | | | | | | |
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| See attached sheets. | | | | | | | |
| CERTIFICATION: I hereby certiffy that the above is a true, correct, and complete statement. | | | | | | | |
| SIGNATURE: /s | //s/ Robert Goldberg | | DATE: | 01/18/2022 | | | |
| NOTE: This filing is not valid without a signature. | | | | | | | |

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