including ti amount, th B - Less th B - At least C - At least E - At least F - At least	FII UNITED SUPREME COURT CLERK'S OFFICE A17 SOUTH KING STREET HONOLULU, HAWAI'I 96813-2912 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 G - At least \$150,000 but less than \$250,000 B - At least \$10,000 but less than \$25,000 H - At least \$250,000 but less than \$250,000 C - At least \$25,000 but less than \$250,000 H - At least \$500,000 but less than \$500,000 B - At least \$100,000 but less than \$10,000 G - At least \$150,000 but less than \$500,000 C - At least \$100,000 but less than \$100,000 F - At least \$500,000 but less than \$100,000 F - At least \$100,000 but less than \$100,000 F - At least \$100,000 but less than \$100,000 T - At least \$100,000 but less than \$100,000 F - At least \$100,000 but less than \$1,000,000 T - At least \$100,000 but less than \$100,000 T - At least \$750,000 but less than \$1,000,000 T - B = FILED BY ALL FULL TIME AND PER DIEM JUDGES. TO BE FILED BY ALL FULL TIME AND PER DIEM JUDGES.				INANCIAL DISCLOSURE STATEMENT THIS SPACE FOR OFFICE USE ONLY Electronically Filed Supreme Court SCFD-15-0000360 21-MAR-2022 10:05 AM Dkt. 17 FDS	
			e only)	Ι		
NAME:	Hamman Kirstin		Marie	NAME OF SF	POUSE OR DOMESTIC PARTNER:	
	AST)	(FIRST)	(MIDDLE)	N/A		
OFFICE ADDRES					Dependent Children:	
		IBER, STREET		(Do not includ	de names)	
CITY OR TOWN:	Wailuku	ZIP COD	96793 E:	1		
JUDICIAL POSITION HELD DATE OF APPOINTMENT OFFICE PHONE						
Circuit Court Judge 12/17/2021 80824					442727	
CALENDAR YEAR	COVERED BY THIS DISCLOSURE:	20 <u>21</u>				
ITEM 1	JUDICIAL COMPENSATION				ANNUAL INCOME	
RSCH 15(d)(1)					G	
ITEM 2 RSCH 15(d)(1)	JUDGE'S OTHER INCOME (if income for services rendered	exceeds \$1,000)				
	EMPLOYER/LAW FIRM		BUSINESS A	DDRESS	ANNUAL INCOME	
ITEM 3 RSCH 15(d)(1)	INCOME OF SPOUSE OR DOM (if income for services rendered		PENDENT CHILDREN		1	
		EMPLOYER			ANNUAL INCOME	

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 R	ENDERED	AMOUNT	
	Check here if entry is None	Check here if you	have attached additional sh	neets		
ITEM 5 RSCH 15(d)(2)	EACH OWNERSHIP OR BENEFICIAL IN VALUE OF \$5,000 OR MORE OR EQU/	NTEREST, HELD IN AN AL TO 10% OF THE O	NY BUSINESS CARRYING WNERSHIP OF THE BUSIN	ON BUSINESS IN THE STA NESS.	TE, HAVING A	
NAME OF BUSINESS		NATI	JRE OF BUSINESS	NATURE OF INTERE	ST ENTER AMOUNT OR NO. OF SHARES 100 %	
	Check here if entry is None	Check here if you	have attached additional sh	leets		
ITEM 6 RSCH 15(d)(2)	OWNERSHIP OR BENEFICIAL INTERE	EST UNDER ITEM 5 TF	ANSFERRED DURING TH	HIS DISCLOSURE PERIOD		
	NAME OF BUSINESS	DA	IE OF TRANSFER	VALUE	OF TRANSFER	
Check here if entry is None Check here if you have attached additional sheets						
ITEM 7 RSCH 15(d)(3)						
NAME OF BUSINESS			TITLE AND TERM OF OFFICE Sole Principal Owner		COMPENSATION (enter amount or NONE) NONE	
	Check here if entry is None	Check here if vou	have attached additional sł	neets		

ITEM 8 RSCH 15(d)(4)		CREDITORS, OTHER THAN CREDIT CARD ACCOUNTS, TO WHOM MORE THAN \$3,000 WAS OWED DURING THE DISCLOSURE OD. LIST CREDIT CARD DEBT THAT EXCEEDED \$10,000 FOR SIX MONTHS OR MORE.					
	NAME AND ADDRESS OF CREDITOR			ORIGINAL AMOUNT OWED	AMO	UNT OWED AT END OF YEAR	
First Hawaiian Bank			С		С		
HSFCU			С		С		
VIFCU				F		F	
Bank Of Haw	<i>v</i> aii			D		D	
PHH Mortga	ge			J		J	
NFCU				D		С	
	Check here if entry is No	one Chec	ck here if you ha	ave attached additional sheets			
ITEM 9 RSCH 15(d)(5)	REAL PROPERTY IN	I THE STATE IN WHICH IS H	IELD AN INTER	REST WITH A FAIR MARKET VALUE OF \$	10,000 OF	R MORE.	
		POSTAL ZIP CODE OF LO	CATION			VALUE	
96793						J	
Check here if entry is None Check here if you have attached additional sheets							
ITEM 10 RSCH 15(d)(5)							
POSTAL ZIP CODE OF LOCATION NATURE OF INTER		NATURE OF INTEREST		E AND ADDRESS OF PERSON RECEIVIN SIDERATION	G	CONSIDERATION GIVEN	
96793		Fee Simple	Evelyn Kit	tagawa - 1991 Kaohu Street, Wailuku		J	
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 RECEIVE						CONSIDERATION RECEIVED	
Check here if entry is None Check here if you have attached additional sheets							

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 addit	ional sheets				
ITEM 13 RSCH 15(d)(7); Rule 3. 13 Revised Code	GIFT(S) THAT MUST BE REPORTED UNDER RULE 3. 13(c) OF THE HAWAI'I REVISED CODE OF JUDICIAL CONDUCT.						
of Judicial Conduct							
SOURCE		DESCRIPTION OF GIFT		ESTIMATED VALUE			
	heck here if entry is None	Check here if you have attached addit	ional sheets				
ITEM 14 RSCH 15(d)(8) & 22(h)	FULL-TIME JUDGES' APPROVED JUDICIAL EDUCATION						
I attended <u>6.5</u> hours of Approved Judicial Education during the reporting period.							
REMARKS: Law Office of Kirstin Hamman is not dissolved yet because of a business line of credit I am paying off. The business has been closed since becoming a full-time judge.							

See attached sheets.

CERTIFICATION: I hereby certiffy that the above is a true, correct, and complete statement.

SIGNATURE: /s/ Kirstin M. Hamman

3/21/22

DATE:

NOTE: This filing is not valid without a signature.