



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

FINANCIAL DISCLOSURE STATEMENT

THIS SPACE FOR OFFICE USE ONLY

**Electronically Filed
Supreme Court
SCFD-21-0000279
17-APR-2022
05:37 PM
Dkt. 3 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 | G - At least \$150,000 but less than \$250,000 |
| B - At least \$1,000 but less than \$10,000 | H - At least \$250,000 but less than \$500,000 |
| C - At least \$10,000 but less than \$25,000 | I - At least \$500,000 but less than \$750,000 |
| D - At least \$25,000 but less than \$50,000 | 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 FILED BY ALL FULL TIME AND PER DIEM JUDGES.

(Type only)

| | | | |
|---|--|-------------------------------------|--|
| NAME: <u>Naso</u> <u>Courtney</u> <u>NICOLLE</u> (LAST) (FIRST) (MIDDLE) | | | NAME OF SPOUSE OR DOMESTIC PARTNER: <u>Paul W. Naso</u> |
| OFFICE ADDRESS: <u>4675 Kapolei Parkway</u> NUMBER, STREET | | | No. of Dependent Children: (Do not include names) <u>1</u> |
| CITY OR TOWN: <u>Kapolei</u> | | ZIP CODE: <u>96707</u> | |
| JUDICIAL POSITION HELD <u>District Family Judge, First Circuit</u> | DATE OF APPOINTMENT <u>11-02-2020</u> | OFFICE PHONE <u>808 954 8100</u> | |

CALENDAR YEAR COVERED BY THIS DISCLOSURE: 2021

| | | |
|-----------------------|---|--------------------|
| ITEM RSCH 15(d)(1) | 1 JUDICIAL COMPENSATION | ANNUAL INCOME G |
| ITEM RSCH 15(d)(1) | 2 JUDGE'S OTHER INCOME (if income for services rendered exceeds \$1,000) | |
| NONE | EMPLOYER/LAW FIRM | BUSINESS ADDRESS |
| | | ANNUAL INCOME 0 |
| ITEM RSCH 15(d)(1) | 3 INCOME OF SPOUSE OR DOMESTIC PARTNER AND DEPENDENT CHILDREN (if income for services rendered exceeds \$1,000) | |
| | EMPLOYER | ANNUAL INCOME |
| | HAWAII EMPLOYERS' MUTUAL INSURANCE COMPANY, INC. | G |

| | |
|-------------------------|---|
| 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 |
|--------|-----------------------------|--------|
| | | |

 Check here if entry is None

 Check here if you have attached additional sheets

| | |
|-------------------------|--|
| ITEM 5 RSCH 15(d)(2) | EACH OWNERSHIP OR BENEFICIAL INTEREST, HELD IN ANY BUSINESS CARRYING ON BUSINESS IN THE STATE, HAVING A VALUE OF \$5,000 OR MORE OR EQUAL TO 10% OF THE OWNERSHIP OF THE BUSINESS. |
|-------------------------|--|

| NAME OF BUSINESS | NATURE OF BUSINESS | NATURE OF INTEREST | ENTER AMOUNT OR NO. OF SHARES |
|------------------|--------------------|--------------------|-------------------------------|
| | | | |

 Check here if entry is None

 Check here if you have attached additional sheets

| | |
|-------------------------|---|
| ITEM 6 RSCH 15(d)(2) | OWNERSHIP OR BENEFICIAL INTEREST UNDER ITEM 5 TRANSFERRED DURING THIS DISCLOSURE PERIOD |
|-------------------------|---|

| NAME OF BUSINESS | DATE 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) | LIST EACH OFFICERSHIP, DIRECTORSHIP, TRUSTEESHIP OR OTHER FIDUCIARY RELATIONSHIP HELD IN ANY BUSINESS. |
|-------------------------|--|

| NAME OF BUSINESS | TITLE AND TERM OF OFFICE | COMPENSATION (enter amount or NONE) |
|------------------------------|-----------------------------|--|
| HAWAII STATE BAR ASSOCIATION | DIRECTOR [1/2021-Present] | NONE |
| HAWAII EMPLOYER'S COUNCIL | DIRECTOR [1/2017 - Present] | NONE |

 Check here if entry is None

 Check here if you have attached additional sheets

| | | | |
|--|--|----------------------|----------------------------|
| 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 ADDRESS OF CREDITOR | | ORIGINAL AMOUNT OWED | AMOUNT OWED AT END OF YEAR |
| Territorial Savings, 1132 Bishop Street, Suite 2200, Honolulu, HI, 96813 | | J | J |
| Hawaii Central FCU, 681 S. King Street, Honolulu, HI 96813 | | F | E |
| AES, P.O. Box 2461, Harrisburg, PA 17105-2461 | | E | E |

Check here if entry is None Check here if you have attached additional sheets

| | | |
|-----------------------------|---|--|
| ITEM 9 RSCH 15(d)(5) | REAL PROPERTY IN THE STATE IN WHICH IS HELD AN INTEREST WITH A FAIR MARKET VALUE OF \$10,000 OR MORE. | |
| POSTAL ZIP CODE OF LOCATION | VALUE | |
| 96734 | K | |

Check here if entry is None Check here if you have attached additional sheets

| | | | |
|-----------------------------|--|--|---------------------|
| ITEM 10 RSCH 15(d)(5) | REAL PROPERTY, THE FAIR MARKET VALUE OF WHICH EXCEEDS \$10,000. ACQUIRED DURING THE DISCLOSURE PERIOD. | | |
| POSTAL ZIP CODE OF LOCATION | NATURE OF INTEREST | NAME AND ADDRESS OF PERSON RECEIVING CONSIDERATION | CONSIDERATION GIVEN |
| | | | |

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 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 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 HAWAII REVISIED CODE OF JUDICIAL CONDUCT.

| SOURCE | DESCRIPTION OF GIFT | ESTIMATED VALUE |
|--------|---------------------|-----------------|
|--------|---------------------|-----------------|

Check here if entry is None Check here if you have attached additional sheets

ITEM 14
RSCH 15(d)(8)
& 22(h) FULL-TIME JUDGES' APPROVED JUDICIAL EDUCATION

I attended 24.75 hours of Approved Judicial Education during the reporting period.

REMARKS:

See attached sheets.

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

SIGNATURE: /s/ Courtney N. Naso DATE: 04/17/2022

NOTE: This filing is not valid without a signature.