

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
- F At least \$100,000 but less than \$150,000
- E At least \$50,000 but less than \$100,000
- 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:	To`ot	To`oto`o		Fa`auuga	L	NAME	OF SPOUSE OR DOMESTIC PARTNER:	
NAME.	(L	AST)		(FIRST)	(MIDDLE)	Shery	yl Turbeville	
OFFICE ADDRE		777	Punchbowl Street	Dependent Children:				
OFFICE	ADDINES	J	NUM	include names)				
CITY OR	R TOWN:	Honolu	ulu, HI	ZIP COD	96813 E:	1		
JUDICIA	L POSITIO	N HELD		DATE OF APPOINTMENT		OFFICE PHONE		
Circuit	Court J	ludge		10/7/2010		539-4074		
CALEND	AR YEAR	COVERED) BY THIS DISCLOSURE:	20 <u>21</u>				
ITEM	1	JUDICIA	AL COMPENSATION				ANNUAL INCOME	
RSCH 15	o(a)(1)						G	
ITEM RSCH 15	2 5(d)(1)		'S OTHER INCOME ne for services rendered	exceeds \$1,000)				
		EM	IPLOYER/LAW FIRM		BUSINESS A	DDRESS	ANNUAL INCOME	
				450710 DADTNED AND DE	DENDENT OF WARREN			
ITEM RSCH 15	3 5(d)(1)		e for services rendered	MESTIC PARTNER AND DE exceeds \$1,000)	PENDENT CHILDREN			
	·			EMPLOYER			ANNUAL INCOME	
State of Hawaii, Charter Commission for Public Schools							E	

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 her	e it you h	ave attached additional she	eets			

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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 AMOUN	ΓOWED	AMO	UNT OWED AT END OF YEAR	
First Hawaiia	ın Bank		Н			G		
2399 Kameh								
Honolulu, HI	96819							
	Check here if entry is No	one Che	ck here if you h	ave attached additional sheet	s			
ITEM 9 RSCH 15(d)(5)	REAL PROPERTY IN	I THE STATE IN WHICH IS I	IELD AN INTEI	REST WITH A FAIR MARKE	Γ VALUE OF \$1	0,000 OR	MORE.	
		POSTAL ZIP CODE OF LC	CATION			VALUE		
96795							I	
	Check here if entry is No	one Che	ck here if you h	ave attached additional sheet	s			
ITEM 10 RSCH 15(d)(5)	REAL PROPERTY, T	HE FAIR MARKET VALUE C	F WHICH EXC	EEDS \$10,000. ACQUIRED	DURING THE [DISCLOSU	JRE PERIOD.	
POSTAL ZIP C	ODE OF LOCATION	NATURE OF INTEREST		E AND ADDRESS OF PERS SIDERATION	ON RECEIVING	}	CONSIDERATION GIVEN	
			001	OIDEIGHION				
	☑ Check here if entry is None ☐ Check here if you have attached additional sheets							
ITEM 11 RSCH 15(d)(5)	REAL PROPERTY, T	HE FAIR MARKET VALUE C	F WHICH EXC	EEDS \$10,000, TRANSFERI	RED DURING T	HE DISCL	LOSURE PERIOD.	
POSTAL ZIP C	ODE OF LOCATION	NAME AND ADDRESS (DF PERSON FL	JRNISHING CONSIDERATION			CONSIDERATION RECEIVED	
	Check here if entry is No	one Cha	ck here if you h	ave attached additional sheet	s			

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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 addit	ional sheets					
ITEM 13 RSCH 15(d)(7); Rule 3. 13 Revised Code of Judicial Conduct	GIFT(S) THAT MUST BE REPORTED	ORTED UNDER RULE 3. 13(c) OF THE HAWAI'I REVISED CODE OF JUDICIAL CONDUCT.						
	SOURCE	DESCRIPTION	N OF GIFT	ESTIMATED VALUE				
	Check 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 attended5.0 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/ Fa`auuga L. To`oto`o		DATE:	1/11/2022				
NOTE: This filing is not valid without a signature.								

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