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					FINANCIAL DISCLOSURE STATEMENT THIS SPACE FOR OFFICE USE ONLY Electronically Filed Supreme Court SCFD-11-0000294	
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 \$100,000 J - At least \$750,000 but less than \$1,000,000 F - At least \$100,000 but less than \$100,000 K -\$1,000,000 or more			22-APR-2022 09:48 AM Dkt. 27 FDS			
TO BE FILE	ED BY ALL FULL TIME AND PE					
1.4.71			(Type only)			
Wilso		Michael	Davis	NAME OF SP	OUSE OR DOMESTIC PARTNER:	
	(LAST)	(FIRST)	(MIDDLE)			
OFFICE ADDRES	417 South King	Street		No. of Depend	lent Children [.]	
OFFICE ADDRES		NUMBER, STREET		(Do not includ		
	Honolulu	ZIP	96813			
CITT OR TOWN.		ZIF 1				
JUDICIAL POSITI	ION HELD	DATE OF APPOINTMEN	T OF	FICE PHONE		
Associate Jus	stice	04/	17/2014	808-53	39-4725	
		SURE: 2021				
CALENDAR YEAF	R COVERED BY THIS DISCLO	SURE: 2021				
ITEM 1 RSCH 15(d)(1)	JUDICIAL COMPENSA	ΓΙΟΝ			ANNUAL INCOME G	
ITEM 2 RSCH 15(d)(1)	JUDGE'S OTHER INCO	DME endered exceeds \$1,000)				
	EMPLOYER/LAW	FIRM	BUSINESS ADDR	RESS	ANNUAL INCOME	
ITEM 3 RSCH 15(d)(1)		DR DOMESTIC PARTNER AND endered exceeds \$1,000)	DEPENDENT CHILDREN			
		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	Ν	ATURE OF SERVICES R	RENDERED	AMOUNT	
	Check here if entry is None	Check here if you h	ave attached additional sh	neets		
ITEM 5 RSCH 15(d)(2)	EACH OWNERSHIP OR BENEFICIAL IN VALUE OF \$5,000 OR MORE OR EQUA				TE, HAVING A	
Rental Proper	Check here if entry is None OWNERSHIP OR BENEFICIAL INTERE	Rental Prop	ave attached additional sh	HIS DISCLOSURE PERIOD	OR NO. OF SHARES	
	NAME OF BUSINESS	DATE	E 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)	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)			
Rental Property Kupu Non Profit Organization			Partner Director		None None	
	Check here if entry is None	Check here if you h	ave attached additional sl	neets		

ITEM 8 RSCH 15(d)(4)		ORS, OTHER THAN CREDIT CARD ACCOUNTS, TO WHOM MORE THAN \$3,000 WAS OWED DURING THE DISCLOSURE T CREDIT CARD DEBT THAT EXCEEDED \$10,000 FOR SIX MONTHS OR MORE.					
	NAME AND ADDRES	SS OF CREDITOR		ORIGINAL AMOUNT OWED	AMOUN	NT OWED AT END OF YEAR	
Bank of Hawaii (Mortgage and Equity Line)			н		Н		
Chase Credi	it Card			С		С	
Chase Creu	it Calu			C		C	
	Check here if entry is No	one Chee	ck here if you h	ave attached additional sheets			
ITEM 9 RSCH 15(d)(5)	REAL PROPERTY IN	N THE STATE IN WHICH IS F	IELD AN INTEI	REST WITH A FAIR MARKET VALUE OF \$	10,000 OR N	IORE.	
		POSTAL ZIP CODE OF LO	CATION		VALUE		
96813					I		
96731						I	
	Check here if entry is No		ck here if you h	ave attached additional sheets			
ITEM 10 RSCH 15(d)(5)	REAL PROPERTY, 1	THE FAIR MARKET VALUE C	F WHICH EXC	EEDS \$10,000. ACQUIRED DURING THE	DISCLOSUF	RE PERIOD.	
POSTAL ZIP C	CODE OF LOCATION	NATURE OF INTEREST		ME AND ADDRESS OF PERSON RECEIVING NSIDERATION		CONSIDERATION GIVEN	
			001				
Check here if entry is None Check here if you have attached additional sheets							
ITEM 11 RSCH 15(d)(5)							
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 additi	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 RE	VISED CODE OF JUDICIAL CONDUCT.				
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 <u>11.5</u> 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/ Michael D. Wilson

04/22/2022

DATE:

NOTE: This filing is not valid without a signature.