

STATE OF HAWAI'I FAMILY COURT THIRD CIRCUIT		CASE ID/NUMBER <hr style="border: 0; border-top: 1px solid black; margin-top: 5px;"/>		COURT USE ONLY			
[] AMENDED [] SUPPLEMENTAL EXHIBIT LIST							
PLAINTIFF/PETITIONER		Attorney for Plaintiff/Petitioner (Name, Address, Phone No., & E-Mail Address)				DATE(S) OF TRIAL OR HEARING	
DEFENDANT/RESPONDENT		ATTORNEY FOR Defendant/Respondent (Name, Address, Phone No., & E-Mail Address)				PREPARING CLERK(S)	
JUDGE							
EXHIBIT NO. _____ PLAINTIFF/ PETITIONER _____ DEFENDANT/ RESPONDENT _____	OFFERED FOR IDENTIFICATION	RECEIVED IN EVIDENCE	WITHDRAWN	DESCRIPTION OF EXHIBIT		DATE R = RETURNED D = DESTROYED OTHER COMMENTS	
FOR OFFICE USE ONLY							
LOCATION OF EXHIBITS							
~ Attached _____ ~ Shelf No. _____ ~ Code No. _____ ~ Other _____							
DATE:			RECEIVED:		PAGE ____ OF ____ PAGES		

If you need an accommodation for a disability when participating in a court program, service, or activity, please contact the ADA Coordinator as far in advance as possible to allow time to provide an accommodation. Call the ADA Coordinator at (808) 961-7629, FAX (808) 961-7577 or send an e-mail to adarequest@courts.hawaii.gov. The ADA Coordinator will try to provide, but cannot guarantee, the requested auxiliary aid, service, or accommodation.

STATE OF HAWAI'I
 FAMILY COURT
 THIRD CIRCUIT

Amended Supplemental
 EXHIBIT LIST
 CONTINUATION SHEET

CASE ID/NUMBER

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