

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

FINANCIAL DISCLOSURE STATEMENT

THIS SPACE FOR OFFICE USE ONLY

Electronically Filed Supreme Court SCFD-12-0000201 09-FEB-2024 09:55 AM Dkt. 33 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
- 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)							
OCHIAI NAME:		DEAN	Е	NAME OF SPO	NAME OF SPOUSE OR DOMESTIC PARTNER:		
NAWL.	(LAST)	(FIRST)		Rene S. C	Ochiai		
OFFICE ADDRE	777 Punchbowl Stree	t MBER, STREET		No. of Depende			
	names)						
CITY OR TOWN:	Honolulu	ZIP COD	96813 E:	1			
JUDICIAL POSIT	TON HELD	DATE OF APPOINTMENT		OFFICE PHONE			
Judge, First	Circuit Court	02/15/	2023	539-4006			
CALENDAR YEA	R COVERED BY THIS DISCLOSURE:	20 <u>23</u>					
ITEM 1 RSCH 15(d)(1)	JUDICIAL COMPENSATION				ANNUAL INCOME		
K3CH 13(u)(1)					G		
ITEM 2 RSCH 15(d)(1)	JUDGE'S OTHER INCOME (if income for services rendere	d exceeds \$1,000)					
	EMPLOYER/LAW FIRM		BUSINESS A	DDRESS	ANNUAL INCOME		
ITEM 3	INCOME OF SPOUSE OR DO	MESTIC PARTNER AND DE	 PENDENT CHII DREN				
RSCH 15(d)(1)							
	ANNUAL INCOME						
Mid-Pacific Institute					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			NATURE OF SERVICES RENDERED			AMOUNT	
Residential Rental		Apar	tment Rental				С
	Check here if entry is None	Check here if you have attached additional sheets					
ITEM 5 RSCH 15(d)(2)	EACH OWNERSHIP OR BENEFICIAL VALUE OF \$5,000 OR MORE OR EQU	INTERES JAL TO 1	ST, HELD IN AN' 0% OF THE OW	/ BUSINESS CARRYING NERSHIP OF THE BUSIN	ON BUSINESS IN THE STA ESS.	TE, HA	VING A
	NAME OF BUSINESS		NATURE OF BUSINESS		NATURE OF INTERE	ST	ENTER AMOUNT OR NO. OF SHARES
Voya Retirem	ent Insurance & Annuity Compa	iny	699 Walnut	Street, Suite 1350	Pension		D
			Des Moines	, IA 50309-3942			
	Check here if entry is None	Ch	eck here if you h	ave attached additional sh	eets		
ITEM 0	OWNEDOUID OD DENEELOM INTED						
ITEM 6 RSCH 15(d)(2)	OWNERSHIP OR BENEFICIAL INTER	ESTUNI	DER ITEM 5 TRA	ANSFERRED DURING TH	IIS DISCLOSURE PERIOD		
	NAME OF BUSINESS		DATE OF TRANSFER		VALUE OF TRANSFER		
	N						
✓ 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.					ESS.		
NAME OF BUSINESS		TITLE AND TERM OF OFFICE		RM OF OFFICE	1	PENSATION amount or NONE)	
						,	,
•	Check here if entry is None	Ch	neck here if you h	ave attached additional sh	neets		

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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	SS OF CREDITOR		ORIGINAL AMOUNT OWED	AMC	OUNT OWED AT END OF YEAR	
	Check here if entry is N	one Cho	ck horo if you h	ave attached additional sheets			
ITEM 9				REST WITH A FAIR MARKET VALUE	OE \$10 000 OE	PMORE	
RSCH 15(d)(5)	KLALFROFERITI			NEST WITHAT AIR WARRET VALUE	1		
96817		POSTAL ZIP CODE OF LO	CATION			VALUE K	
96814						I	
	Check here if entry is No	one Che	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	CEEDS \$10,000. ACQUIRED DURING	THE DISCLOS	URE PERIOD.	
POSTAL ZIP C	ODE OF LOCATION	NATURE OF INTEREST		E AND ADDRESS OF PERSON REC SIDERATION	EIVING	CONSIDERATION GIVEN	
Check here if entry is None ☐ Check here if you have attached additional sheets							
ITEM 11 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		
• c	Check here if entry is N	one Che	ck here if you h	ave attached additional sheets			

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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	NATURE OF INTEREST	VALUE			
	Check here if entry is None	Check here if you have attached addi	tional 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 HAWAI'I REVISED CODE OF JUDICIAL CONDUCT.						
	SOURCE	DESCRIPTIO	N OF GIFT	ESTIMATED VALUE			
	theck here if entry is None	Check here if you have attached addi	tional sheets				
ITEM 14 RSCH 15(d)(8) & 22(h)	FULL-TIME JUDGES' APPROVED JU	DICIAL EDUCATION					
I attended 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/ Dean E. Ochiai		DATE:	February 9, 2024			
NOTE: This filing is not valid without a signature.							

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