

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

K -\$1,000,000 or more

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

## FINANCIAL DISCLOSURE STATEMENT

THIS SPACE FOR OFFICE USE ONLY

**Electronically Filed Supreme Court** SCFD-11-0000271 12-APR-2024 11:12 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
- E At least \$50,000 but less than \$100,000
- F At least \$100,000 but less than \$150,000

TO BE FILED BY ALL FULL TIME AND PER DIEM JUDGES.

(Type only)							
NAME: _	Remig	jio	Catherine	Haunani	N	NAME OF SPOUSE OR DOMESTIC PARTNE	
	(L	AST)	(FIRST)	(MIDDLE)		oel Wintje	n
OFFICE A	ADDRESS	777 Punchbowl Street				o. of Depender	
		Do not include i	names)				
CITY OR 1	TOWN:	Honolulu	ZIP COD	96813 E:		0	
JUDICIAL	POSITIO	N HELD	DATE OF APPOINTMENT		OFFICE PHON	E	
Judge			4/7/2017			808-539-4030	
CALENDA	AR YEAR	COVERED BY THIS DISCLOSURE:	20 <u>23</u>				
ITEM	1	JUDICIAL COMPENSATION					ANNUAL INCOME
RSCH 15(	d)(1)	JUDICIAL COMPENSATION					G
ITEM RSCH 15(c	2 d)(1)	JUDGE'S OTHER INCOME (if income for services rendered	exceeds \$1,000)				
		EMPLOYER/LAW FIRM		BUSINESS A	DDRESS		ANNUAL INCOME
None							
ITEM	3	INCOME OF SPOUSE OR DOM		PENDENT CHILDREN			
RSCH 15(d	d)(1)	(if income for services rendered					
Dept of Defense							ANNUAL INCOME
							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		N	ATURE OF SERVICES RI	ENDERED		AMOUNT		
	Check here if entry is None	Cr	neck here if you h	ave attached additional sh	eets				
ITEM 5 RSCH 15(d)(2)	ITEM 5 EACH OWNERSHIP OR BENEFICIAL INTE RSCH 15(d)(2) VALUE OF \$5,000 OR MORE OR EQUAL			REST, HELD IN ANY BUSINESS CARRYING ON BUSINESS IN THE STATE, HAVING A D 10% OF THE OWNERSHIP OF THE BUSINESS.					
Capital World			neck here if you h	ave attached additional shansferred during the	IIS DISCLOSURE PERIOD		ENTER AMOUNT OR NO. OF SHARES  D  C  C  B  C		
✓ Check here if entry is None Check here if you have attached additional sheets									
ITEM 7 RSCH 15(d)(3)	ITEM 7 LIST EACH OFFICERSHIP, DIRECTORSHIP, TRUSTEESHIP OR OTHER FIDUCIARY RELATIONSHIP HELD IN ANY BUSINESS.								
	NAME OF BUSINESS				RM OF OFFICE		PENSATION r amount or NONE)		
✓ Check here if entry is None Check here if you have attached additional sheets									

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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 ADDRESS OF CREDITOR	ORIGINAL AMOUNT OWED	AMOUNT OWED AT END OF YEA				
Freedom Mo	rtgage		I		1		
Bank of Haw	aii		Н		Н		
	Check here if entry is None Check	here if you ha	ave attached additional sheets				
ITEM 9 RSCH 15(d)(5)	REAL PROPERTY IN THE STATE IN WHICH IS HE	LD AN INTEF	REST WITH A FAIR MARKET VALUE OF \$1	0,000 OR	MORE.		
	POSTAL ZIP CODE OF LOCA	ATION		VALUE			
96706				K			
96701				J			
96797					Н		
	Check here if entry is None Check	here if you ha	ave attached additional sheets				
ITEM 10 RSCH 15(d)(5)	REAL PROPERTY, THE FAIR MARKET VALUE OF	WHICH EXC	EEDS \$10,000. ACQUIRED DURING THE I	DISCLOSI	JRE PERIOD.		
POSTAL ZIP CODE OF LOCATION NATURE OF INTEREST NAME AND ADDRESS OF PERSON CONSIDERATION				3	CONSIDERATION GIVEN		
		00.1	5.5 <u>-</u> 1.0				
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.							
	ODE OF LOCATION NAME AND ADDRESS OF	PERSON FU	JRNISHING CONSIDERATION		CONSIDERATION RECEIVED		
	Check here if entry is None Check	here if you ha	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 addit	tional sheets					
ITEM 13 RSCH 15(d)(7); Rule 3. 13 Revised Code of Judicial Conduct	GIFT(S) THAT MUST BE REPORTED	(S) THAT MUST BE REPORTED 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	tional sheets					
ITEM 14 RSCH 15(d)(8) & 22(h)	FULL-TIME JUDGES' APPROVED JUDICIAL 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/ Catherine H. Remigio		DATE:	April 12, 2024				
NOTE: This filing is not valid without a signature.								

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