FIN SUPREME COURT CLERK'S OFFICE 417 SOUTH KING STREET HONOLULU, HAWAI'I 96813-2912 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 G - At least \$150,000 but less than \$250,000 B - At least \$10,000 but less than \$250,000 H - At least \$250,000 but less than \$250,000 D - At least \$50,000 but less than \$250,000 J - At least \$50,000 but less than \$250,000 B - At least \$50,000 but less than \$250,000 J - At least \$50,000 but less than \$250,000 B - At least \$50,000 but less than \$100,000 F - At least \$750,000 but less than \$100,000 F - At least \$100,000 but less than \$100,000 F - At least \$750,000 but less than \$100,000 F - At least \$100,000 but less than \$100,000 K - \$1,000,000 or more					FINANCIAL DISCLOSURE STATEMENT THIS SPACE FOR OFFICE USE ONLY Electronically Filed Supreme Court SCFD-11-0000294 30-APR-2024 07:51 AM Dkt. 31 FDS		
TO BE FIL	ED BY ALL FULL TIME AND PER DI						
		· · · ·	ype only)	NAME OF SD	OUSE OR DOMESTIC PARTNER:		
Wilis		Michael	Davis		OUSE OR DOMESTIC FARTNER.		
	(LAST)	(FIRST)	(MIDDLE)				
OFFICE ADDRE	SS:				of Dependent Children:		
	N	IMBER, STREET		(Do not includ	(Do not include names)		
CITY OR TOWN:		ZIP CC	DDE:				
JUDICIAL POSIT	TON HELD	DATE OF APPOINTMENT	OF	FICE PHONE			
Associate Ju	stice	4/17	//2014				
	R COVERED BY THIS DISCLOSURE	2023					
CALENDARTEA		20 <u>20</u>					
ITEM 1 RSCH 15(d)(1)	JUDICIAL COMPENSATION				ANNUAL INCOME		
	JUDGE'S OTHER INCOME				L		
ITEM 2 RSCH 15(d)(1)	(if income for services render	ed exceeds \$1,000)					
	EMPLOYER/LAW FIRM		BUSINESS ADDR	RESS	ANNUAL INCOME		
ITEM 3 RSCH 15(d)(1)	INCOME OF SPOUSE OR D (if income for services render		EPENDENT CHILDREN				
		EMPLOYER			ANNUAL INCOME		

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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 RI	ENDERED		AMOUNT
	Check here if entry is None	Che	ck here if you h	ave attached additional sh	eets		
ITEM 5 RSCH 15(d)(2)	EACH OWNERSHIP OR BENEFICIAL II VALUE OF \$5,000 OR MORE OR EQU					TE, HAVI	NG A
NAME OF BUSINESS Rental Property			NATURE OF BUSINESS Rental Property		NATURE OF INTEREST		ENTER AMOUNT OR NO. OF SHARES
0	Check here if entry is None	Che	ick here if you ha	ave attached additional sh	eets		
ITEM 6 RSCH 15(d)(2)	OWNERSHIP OR BENEFICIAL INTERE	EST UND	ER ITEM 5 TRA	ANSFERRED DURING TH	IIS DISCLOSURE PERIOD		
	NAME OF BUSINESS		DATE	E OF TRANSFER	VALUE	OF TRAN	ISFER
Check here if entry is None Check here if you have attached additional sheets							
ITEM 7 RSCH 15(d)(3)							
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	Che	eck here if you h	ave attached additional sh	ieets		

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 AM		IOUNT OWED AT END OF YEAR		
Bank of Hawaii (Mortgage and Equity Line)				н		Н		
Chase Credit Card			С		С			
	Check here if entry is No	one Che	ck here if vou h	ave attached additional sheets				
ITEM 9				REST WITH A FAIR MARKET VALUE OF \$	310,000 OF	R MORE.		
RSCH 15(d)(5)						VALUE		
96813		POSTAL ZIP CODE OF LO	CATION			I VALUE		
96731						I		
50701						,		
	Check here if entry is No	one Che	ck here if you h	ave attached additional sheets				
ITEM 10 RSCH 15(d)(5)								
POSTAL ZIP C	ODE OF LOCATION	NATURE OF INTEREST		IAME AND ADDRESS OF PERSON RECEIVING CONSIDERATION		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								
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	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 UNDER RULE 3. 13(c) OF THE HAWAI'I REVISED CODE OF JUDICIAL CONDUCT.						
SOURCE		DESCRIPTIO	ESTIMATED VALUE				
Check here if entry is None Check here if you have attached additional sheets							
ITEM 14 RSCH 15(d)(8) & 22(h)	RSCH 15(d)(8) FULL-TIME JUDGES' APPROVED JUDICIAL EDUCATION						
I attended <u>0.00</u> 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/ Michael D. Wilson

DATE: 4/30/2024

NOTE: This filing is not valid without a signature.