



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

FINANCIAL DISCLOSURE STATEMENT

THIS SPACE FOR OFFICE USE ONLY

**Electronically Filed
Supreme Court
SCFD-11-0000222
29-JAN-2024
07:53 AM
Dkt. 34 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
- 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)

| | | |
|---|---|---|
| <p>NAME: <u>Kawashima</u> <u>James</u> <u>S.</u> (LAST) (FIRST) (MIDDLE)</p> <p>OFFICE ADDRESS: <u>1111 Alakea St.</u> NUMBER, STREET</p> <p>CITY OR TOWN: <u>Honolulu</u> ZIP CODE: <u>96813</u></p> | <p>NAME OF SPOUSE OR DOMESTIC PARTNER: <u>Elaine E.M. Kawashima</u></p> <p>No. of Dependent Children: (Do not include names) <u>2</u></p> | |
| <p>JUDICIAL POSITION HELD <u>Circuit Judge</u></p> | <p>DATE OF APPOINTMENT <u>11/30/2022</u></p> | <p>OFFICE PHONE <u>808-538-5413</u></p> |

CALENDAR YEAR COVERED BY THIS DISCLOSURE: 2023

| ITEM RSCH 15(d)(1) | JUDICIAL COMPENSATION | ANNUAL INCOME |
|-----------------------|--|------------------|
| 1 | | G |
| ITEM RSCH 15(d)(1) | JUDGE'S OTHER INCOME (if income for services rendered exceeds \$1,000) | ANNUAL INCOME |
| | EMPLOYER/LAW FIRM | BUSINESS ADDRESS |
| | | |
| ITEM RSCH 15(d)(1) | INCOME OF SPOUSE OR DOMESTIC PARTNER AND DEPENDENT CHILDREN (if income for services rendered exceeds \$1,000) | ANNUAL INCOME |
| | EMPLOYER | ANNUAL INCOME |
| | <u>Iolani School</u> | 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 |
|--------|-----------------------------|--------|
| | | |

 Check here if entry is None

 Check here if you have attached additional sheets

| | |
|-------------------------|--|
| ITEM 5 RSCH 15(d)(2) | EACH OWNERSHIP OR BENEFICIAL INTEREST, HELD IN ANY BUSINESS CARRYING ON BUSINESS IN THE STATE, HAVING A VALUE OF \$5,000 OR MORE OR EQUAL TO 10% OF THE OWNERSHIP OF THE BUSINESS. |
|-------------------------|--|

| NAME OF BUSINESS | NATURE OF BUSINESS | NATURE OF INTEREST | ENTER AMOUNT OR NO. OF SHARES |
|------------------|--------------------|--------------------|-------------------------------|
| | | | |

 Check here if entry is None

 Check here if you have attached additional sheets

| | |
|-------------------------|---|
| ITEM 6 RSCH 15(d)(2) | OWNERSHIP OR BENEFICIAL INTEREST UNDER ITEM 5 TRANSFERRED DURING THIS DISCLOSURE PERIOD |
|-------------------------|---|

| NAME OF BUSINESS | DATE OF TRANSFER | VALUE OF TRANSFER |
|------------------|------------------|-------------------|
| | | |

 Check here if entry is None

 Check here if you have attached additional sheets

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|-------------------------|--|
| 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) |
|------------------|--------------------------|--|
| | | |

 Check here if entry is None

 Check here if you have attached additional sheets

| | | | |
|------------------------------|--|----------------------------|--|
| 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 YEAR | |

Check here if entry is None Check here if you have attached additional sheets

| | | | |
|--|---|--|--|
| ITEM 9 RSCH 15(d)(5) | REAL PROPERTY IN THE STATE IN WHICH IS HELD AN INTEREST WITH A FAIR MARKET VALUE OF \$10,000 OR MORE. | | |
| POSTAL ZIP CODE OF LOCATION 96825 | VALUE J | | |

Check here if entry is None Check here if you have attached additional sheets

| | | | | |
|-----------------------------|--|--|---------------------|--|
| ITEM 10 RSCH 15(d)(5) | REAL PROPERTY, THE FAIR MARKET VALUE OF WHICH EXCEEDS \$10,000. ACQUIRED DURING THE DISCLOSURE PERIOD. | | | |
| POSTAL ZIP CODE OF LOCATION | NATURE OF INTEREST | NAME AND ADDRESS OF PERSON RECEIVING CONSIDERATION | CONSIDERATION GIVEN | |

Check here if entry is None Check here if you have attached additional sheets

| | | | |
|-----------------------------|---|------------------------|--|
| ITEM 11 RSCH 15(d)(5) | 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 | NATURE OF INTEREST | VALUE |

Check here if entry is None Check here if you have attached additional 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 HAWAII REVISIED CODE OF JUDICIAL CONDUCT. | | |
|---|--|--|--|

| | | |
|--------|---------------------|-----------------|
| SOURCE | DESCRIPTION OF GIFT | ESTIMATED VALUE |
|--------|---------------------|-----------------|

Check here if entry is None Check here if you have attached additional sheets

| | | | |
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| ITEM 14 RSCH 15(d)(8) & 22(h) | FULL-TIME JUDGES' APPROVED JUDICIAL EDUCATION | | |
|-------------------------------------|---|--|--|

I attended 16 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/ James S. Kawashima

DATE: 1/29/2024

NOTE: This filing is not valid without a signature.