

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-14-0000762 25-APR-2024 03:48 PM Dkt. 19 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.

		(T	ype only)			
	rman	Sara	Lee	NAME OF SP	OUSE OR DOMESTIC PARTNER:	
NAME:	LAST)	(FIRST)	(MIDDLE)			
	4480 Ahukini Road,	Suite 202		No. of Depend	ont Children	
OFFICE ADDRES	SS: N	JMBER, STREET		(Do not includ		
CITY OR TOWN:	Lihue	ZIP CO	96766 DDE:	_		
JUDICIAL POSITI	ON HELD	DATE OF APPOINTMENT	NTMENT OFFICE PHONE			
Per Diem Jud	lge	02/0	/02/2019 80		808-246-6988	
CALENDAR YEAR	R COVERED BY THIS DISCLOSURE	20 <u>23</u>				
ITEM 1	JUDICIAL COMPENSATION				ANNUAL INCOME	
RSCH 15(d)(1)	JODICIAL COMPENSATION				A	
ITEM 2 RSCH 15(d)(1)	JUDGE'S OTHER INCOME (if income for services render	red exceeds \$1,000)				
EMPLOYER/LAW FIRM BUSINESS ADDRESS					ANNUAL INCOME	
Sara L. Silverman, Attorney at Law			4480 Ahukini Road, Suite 202, Lihue 96766		G	
	**************************************		EDENDENT OF HER DEEM			
ITEM 3 RSCH 15(d)(1)	INCOME OF SPOUSE OR D (if income for services render		DEPENDENT CHILDREN			
		EMPLOYER			ANNUAL INCOME	

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 RI	ENDERED	AMOUNT
	Check here if entry is None		have attached additional sh		TE HAVING A
ITEM 5 RSCH 15(d)(2)	EACH OWNERSHIP OR BENEFICIAL VALUE OF \$5,000 OR MORE OR EQU	JAL TO 10% OF THE OV	VNERSHIP OF THE BUSIN	ESS.	ITE, HAVING A
	NAME OF BUSINESS	NATU	IRE OF BUSINESS	NATURE OF INTERE	EST 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 INTER	EST UNDER ITEM 5 TR	ANSFERRED DURING TH	IS DISCLOSURE PERIOD	
	NAME OF BUSINESS	DAT	E OF TRANSFER	VALUE	OF TRANSFER
✓ Check here if entry is None					
ITEM 7 RSCH 15(d)(3) LIST EACH OFFICERSHIP, DIRECTORSHIP, TRUSTEESHIP OR OTHER FIDUCIARY RELATIONSHIP HELD IN ANY BUSINESS.					
	NAME OF BUSINESS			RM OF OFFICE	COMPENSATION (enter 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)		ST CREDITORS, OTHER THAN CREDIT CARD ACCOUNTS, TO WHOM MORE THAN \$3,000 WAS OWED DURING THE DISCLOSURE ERIOD. LIST CREDIT CARD DEBT THAT EXCEEDED \$10,000 FOR SIX MONTHS OR MORE.			
	NAME AND ADDRESS OF CREDITOR		ORIGINAL AMOUNT OWED	AMOL	JNT OWED AT END OF YEAR
Bank of Hawaii, Lihue, HI 96766			Н		Α
Kauai Federa	al Credit Union, Lihue, HI 96766		E		Е
			0 1 1 122 11 1		
			ve attached additional sheets		
ITEM 9 RSCH 15(d)(5)	REAL PROPERTY IN THE STATE IN WHICH IS HEL	LD AN INTER	EST WITH A FAIR MARKET VALUE OF \$1	0,000 OR I	MORE.
	POSTAL ZIP CODE OF LOCA	ATION			VALUE
96765					J
	Check here if entry is None Check h	here if you ha	ve attached additional sheets		
ITEM 10 RSCH 15(d)(5)	REAL PROPERTY, THE FAIR MARKET VALUE OF V	WHICH EXCE	EEDS \$10,000. ACQUIRED DURING THE I	DISCLOSU	RE PERIOD.
POSTAL ZIP C	ODE OF LOCATION NATURE OF INTEREST		E AND ADDRESS OF PERSON RECEIVING	3	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.					
RSCH 15(d)(5)					
POSTAL ZIP C	DDE OF LOCATION NAME AND ADDRESS OF I	PERSON FU	RNISHING CONSIDERATION		CONSIDERATION RECEIVED
~ C	theck here if entry is None Check h	here it vou ha	ve 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 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 attendedhours 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	s/ Sara L. Silverman		DATE:	04/25/2024			
NOTE: This filing is not valid without a signature.							

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