Image: Superiod of the second state				CIAL DISCLOSURE STATEMENT (SHORT FORM) INS SPACE FOR OFFICE USE ONLY Electronically Filed Supreme Court SCFD-13-0000230 05-MAR-2025 03:33 PM Dkt. 34 FDS
		(Type only)		
NAME: Cahill (LAST) OFFICE ADDRESS: 2145 Main S	Peter (FIRST treet, Courtroom 2		(MIDDLE)	NAME OF SPOUSE OR DOMESTIC PARTNER:
CITY OR TOWN: Wailuku JUDICIAL POSITION: Circuit Court Judge	NUMBER, STREE	ZIP CODE: 96793	<sup>3:</sup> 04/24/2027	No. of Dependent Children: (Do not include names) OFFICE PHONE: 808-244-2980
CALENDAR YEAR COVERED BY TH	IIS DISCLOSURE: 20	24		
2. V I have the follow	you check number 2, es to report since my la ng changes to report s	ast filing.	ation.	
ITEM# 2 Peter T. Cahill Renta	Add Income: D.	Delete	Chai	nge 🖌 As follows:
ITEM# 8 Shellpoint Mortage S	Add Servicing, Greenville	Delete , SC: G	Char	nge 🖌 As follows:
ITEM#	Add	Delete	Char	nge As follows:
ITEM#	Add	Delete	Char	nge 🗌 As follows:

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

## I attended <u>43.50</u> hours of Approved Judicial Education during the reporting period.

I have reviewed my previous Disclosure of Financial Interests Statement filed with the Supreme Court Clerk's Office and all succeeding amendments. I hereby certify that the information I have provided on this form is a true, correct, and complete statement of my currently reportable financial interests and that there have been no other changes in my reportable financial interests since my reports were filed.

Signature: /s/ Peter T. Cahill

Date: \_\_\_\_\_