

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

## FINANCIAL DISCLOSURE STATEMENT (SHORT FORM)

THIS SPACE FOR OFFICE USE ONLY

Electronically Filed Supreme Court SCFD-22-0000297 20-MAR-2025 02:57 PM Dkt. 7 FDS

## Our reason Court Duly 45 no miner annual filiance

WHO SHOULD FILE THIS FORM: Supreme Court Rule 15 requires annual filings. Persons who filed the initial form (JUD 101) may satisfy this requirement by using this amendatory form.

INSTRUCTIONS

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

|                       |                             |                           | (Type only)                 | •             |   |
|-----------------------|-----------------------------|---------------------------|-----------------------------|---------------|---|
| NAME: So              | kolow                       | Joanna                    | Elizabe                     | eth           | NAME OF SPOUSE OR DOMESTIC PARTNER:                 |
|                       | (LAST)                      | (FIRST)                   | (N                          | (IDDLE)       | Ben Duke  |
| OFFICE AD             | DRESS:                      | ka'eha Ave.               |                             |               | Bell Duke   |
|                       |                             | NUMBER, STREET            |                             |               |   |
| CITY OR TO            | <sub>DWN:</sub> Kailua Kona |                           | ZIP CODE: 96740             | <del></del>   | No. of Dependent Children: 2 (Do not include names) |
| JUDICIAL P            | POSITION:                   | TERM OF OFF               |                             | OFFICE PHONE: |   |
| District Family court |                             | BEGAN: 08/03              | 08/03/2022 ENDS: 08/02/2026 |               | 808-443-2112  |
| CALENDAR              | YEAR COVERED BY THIS        | disclosure: 2024          |                             |               |   |
| Check                 | either number 1 or 2. If yo | u check number 2, prov    | vide the relevant informat  | ion.          |   |
| 1.                    | I have no changes t         | o report since my last fi | iling.                      |               |   |
| 2.                    | I have the following        | changes to report since   | e my last filing:           |               |   |
|                       | ITEM# 8                     | Add                       | Delete                      | <b>✓</b> Cha  | nge 🔽 As follows:                                   |
|                       | Hawaii State Federal C      |                           |                             | <u> </u>      | , to tonomor  |
|                       |                             | ,                         |                             |               |   |
|                       | ITCN#                       |                           | □ Delete                    | Ch.           |   |
|                       | ITEM#                       | Add                       | Delete                      | Cha           | nge As follows:                                     |
|                       |                             |                           |                             |               |   |
|                       |                             |                           |                             |               |   |
|                       | ITEM#                       | Add                       | Delete                      | Cha           | nge As follows:                                     |
|                       |                             |                           |                             |               | • Ш   |
|                       |                             |                           |                             |               |   |
|                       |                             |                           |                             |               |   |
|                       | ITEM#                       | Add                       | Delete                      | Cha           | nge As follows:                                     |
|                       |                             |                           |                             |               |   |
|                       |                             |                           |                             |               |   |
|                       |                             |                           |                             |               |   |
|                       | Check here if you ha        | ve attached additional s  | sheet(s)                    |               |   |

| I attended 52.00 hours of Approved Judicial Education             | during the reporting period.   |
|---|--|
| amendments. I hereby certify that the information I have provided | tement filed with the Supreme Court Clerk's Office and all succeeding d on this form is a true, correct, and complete statement of my currently hanges in my reportable financial interests since my reports were filed. |
|   | _ 03/20/2025   |

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