THE ME COL			FINANCIAL DISCLOSURE		
			Ele	THIS SPACE FOR OFFICE USE ONLY Electronically Filed Supreme Court	
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 \$1,000G - At least \$150,000 but less than \$250,000B - At least \$1,000 but less than \$10,000H - At least \$250,000 but less than \$500,000C - At least \$10,000 but less than \$25,000I - At least \$500,000 but less than \$750,000D - At least \$25,000 but less than \$50,000J - At least \$750,000 but less than \$1,000,000E - At least \$50,000 but less than \$100,000K -\$1,000,000 or moreF - At least \$100,000 but less than \$150,000TO BE FILED BY ALL FULL TIME AND PER DIEM JUDGES.		SCFD-20-0000279 24-APR-2025 12:27 PM Dkt. 23 FDS			
		Type only)	ļ		
Tsuchiya	Kimberly	Bryn Mari NAME OF		OF SPOUSE OR DOMESTIC PARTNER:	
ME:(LAST)	(FIRST)	(MIDDLE)			
7 TICE ADDRESS:	74-5451 Kamaka`eha Avenue		No. of Depende		
	lua-Kona ZIP C	96740	1		
M 1	e Third Circuit 12/0 RED BY THIS DISCLOSURE: 2024	02/2021	(808) 32	22-8710 ANNUAL INCOME G	
	GE'S OTHER INCOME come for services rendered exceeds \$1,000)				
	EMPLOYER/LAW FIRM	BUSINESS ADD	RESS	ANNUAL INCOME	
	OME OF SPOUSE OR DOMESTIC PARTNER AND I come for services rendered exceeds \$1,000)	DEPENDENT CHILDREN			
1	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 R	ENDERED		AMOUNT
	Check here if entry is None			ave attached additional sh			
ITEM 5 RSCH 15(d)(2)	EACH OWNERSHIP OR BENEFICIAL VALUE OF \$5,000 OR MORE OR EQU					TE, HAV	/ING A
ITEM 6 RSCH 15(d)(2)	NAME OF BUSINESS Check here if entry is None OWNERSHIP OR BENEFICIAL INTER NAME OF BUSINESS		eck here if you h DER ITEM 5 TR/	RE OF BUSINESS ave attached additional sh ANSFERRED DURING TH E OF TRANSFER			ENTER AMOUNT OR NO. OF SHARES
	Check here if entry is None		peck here if your	ave attached additional sh	leets		
ITEM 7							
RSCH 15(d)(3)	NAME OF BUSINESS				RM OF OFFICE	COMF	PENSATION amount or NONE)
	Check here if entry is None	Cr	neck here if you h	nave attached additional sh	leets		

ITEM 8 RSCH 15(d)(4)						
	NAME AND ADDRESS OF CREDITOR	ORIGINAL AMOUNT OWED	AMOUNT OWED AT END OF YEAR			
JP Morgan C	hase NA, P.O. Box 78420, Phoenix, AZ 85	062 I	Ι			
Hawaii Comi	n FCU, 73-5611 Olowalu St., Kailua Kona,	HI G	G			
FHB, P.O. B	ox 29450, Honolulu, HI 96820	с	В			
FHB, P.O. B	ox 29450, Honolulu, HI 96820	с	В			
Barclays, P.0	D. Box 60517, City of Industry, CA 91716-0	517 A	D			
	Check here if entry is None	here if you have attached additional sheets				
ITEM 9 RSCH 15(d)(5)						
	POSTAL ZIP CODE OF LOCA	ATION	VALUE			
96740	POSTAL ZIP CODE OF LOCA	ATION	VALUE K			
96740	POSTAL ZIP CODE OF LOCA	TION				
96740	POSTAL ZIP CODE OF LOCA	ATION				
96740	POSTAL ZIP CODE OF LOCA	TION				
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96740	POSTAL ZIP CODE OF LOCA	NTION				
96740	POSTAL ZIP CODE OF LOCA	ATION				
96740	POSTAL ZIP CODE OF LOCA	NTION				
		ATION				
	Check here if entry is None		K			

			CONSIDERATION		
	Check here if entry is No	one Cheo	ck 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 C	ODE OF LOCATION	NAME AND ADDRESS C	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 addi	tional sheets			
ITEM 13 RSCH 15(d)(7); Rule 3. 13 Revised Code of Judicial Conduct	RSCH 15(d)(7); Rule 3. 13 Revised Code of Judicial GIFT(S) THAT MUST BE REPORTED UNDER RULE 3. 13(c) OF THE HAWAI'I REVISED CODE OF JUDICIAL CONDUCT.					
	SOURCE	DESCRIPTIO	N OF GIFT	ESTIMATED VALUE		
Check here if entry is None Check here if you have attached additional sheets						
ITEM 14 RSCH 15(d)(8) & 22(h)	SCH 15(d)(8) FULL-TIME JUDGES' APPROVED JUDICIAL EDUCATION					
I attended <u>37.50</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/ Kimberly B. Tsuchiya

NOTE: This filing is not valid without a signature.

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04/24/2025

DATE: