



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-11-0000187
29-APR-2026
09:36 AM
Dkt. 37 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>Castagnetti</u> <u>Jeannette</u> <u>H.</u> (LAST) (FIRST) (MIDDLE)</p> <p>OFFICE ADDRESS: <u>777 Punchbowl Street</u> NUMBER, STREET</p> <p>CITY OR TOWN: <u>Honolulu</u> ZIP CODE: <u>96813</u></p> | <p>NAME OF SPOUSE OR DOMESTIC PARTNER: Mark Castagnetti</p> <p>No. of Dependent Children: (Do not include names) 0</p> |
|--|--|

| | | |
|------------------------------------|---------------------|----------------|
| JUDICIAL POSITION HELD | DATE OF APPOINTMENT | OFFICE PHONE |
| Circuit Court Judge, First Circuit | 09/30/2020 | (808) 539-4025 |

CALENDAR YEAR COVERED BY THIS DISCLOSURE: 2025

| | | |
|-----------------------|-----------------------|---------------------------|
| ITEM RSCH 15(d)(1) | JUDICIAL COMPENSATION | ANNUAL INCOME G |
|-----------------------|-----------------------|---------------------------|

| | | |
|-----------------------|---|--|
| ITEM RSCH 15(d)(1) | JUDGE'S OTHER INCOME (if income for services rendered exceeds \$1,000) | |
|-----------------------|---|--|

| EMPLOYER/LAW FIRM | BUSINESS ADDRESS | ANNUAL INCOME |
|-------------------|------------------|---------------|
| | | |

| | | |
|-----------------------|--|--|
| ITEM RSCH 15(d)(1) | INCOME OF SPOUSE OR DOMESTIC PARTNER AND DEPENDENT CHILDREN (if income for services rendered exceeds \$1,000) | |
|-----------------------|--|--|

| EMPLOYER | ANNUAL INCOME |
|---|---------------|
| Employees' Retirement System, State of Hawaii | 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 |
|--------------------|--------------------|--------------------|-------------------------------|
| Empower Retirement | Mutual Fund | Shares | H |
| Empower Retirement | Mutual Fund | Shares | G |
| Voya Financial | Mutual Fund | Shares | G |
| LPL Financial IRA | Mutual Fund | Shares | G |

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

| | |
|-------------------------|--|
| 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 |
| First Hawaiian Bank, PO Box 1300, Honolulu, HI 96807 | I | H |
| Hawaii State FCU, PO Box 3072, Honolulu, HI 96802 | D | C |

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 | VALUE | |
| 96825 | K | |

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

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

I attended 19.00 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/ Jeannette H. Castagnetti

DATE: 04/29/2026

NOTE: This filing is not valid without a signature.