

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

FINANCIAL DISCLOSURE STATEMENT

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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 may 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.

| | | (Ty | ype or Print Clearly) | L | | |
|--|---|-----------------------------------|-------------------------|------------------------|---|------------------|
| NAME: Kawano Kelsey (LAST) (FIRST) OFFICE ADDRESS: 2145 Main Street, Suite 13 NUMBER, STREET Wailuku, HI | | reet, Suite 137 | T. (MIDDLE) ODE: 96793 | | NAME OF SPOUSE OR DOMESTIC PARTNER: Colleen C. Kawano No. of Dependent Children: (Do not include names) | |
| JUDICIAL POSITI | | DATE OF APPOINTMENT August 29, 20 | | OFFICE PHO (808) 24 | | |
| ITEM 1 RSCH 15(d)(1) | JUDICIAL COMPENSATIO | NC | | | | ANNUAL INCOME |
| ITEM 2 RSCH 15(d)(1) | JUDGE'S OTHER INCOM | | | | | |
| | EMPLOYER/LAW FIR | RM | BUSINESS A | ADDRESS | | ANNUAL INCOME NA |
| ITEM 3 RSCH 15(d)(1) | INCOME OF SPOUSE OR (if income for services reno | | ID DEPENDENT CHILDREN | | | |
| | | EMPLOYER | | | | ANNUAL INCOME NA |

| 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 RENI | DERED | | AMOUNT |
| wedding fee | | wedding officiant | | | В | 7.1110-0111 | |
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| | Check here if entry is None | Check here if you have attached additional sheets | | | | | |
| ITEM 5 RSCH 15(d)(2) | EACH OWNERSHIP OR BENEFICIAL VALUE OF \$5,000 OR MORE OR EQU | INTE JAL T | REST, HELD IN ANY O 10% OF THE OWI | ' BUSINESS CARRYI NERSHIP OF THE BU | NG ON BUSINESS IN TH ISINESS. | HE STA | TE, HAVING A |
| | NAME OF BUSINESS | | NATURE O | F BUSINESS | NATURE OF INTER | EST | ENTER AMOUNT OR NO. OF SHARES |
| Alexandei | · & Baldwin, Inc. | | domestic c | orp. | stock shares | | |
| Public Sto | rage, Inc. | | foreign corp | • | Slock Shares | | D B |
| | | | | | | | Ь |
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| ☐ 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 | | |
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| 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 ANI | O TERM OF OFFICE | | COMPENSATION (enter amount or NONE) |
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| ☐ Check here if entry is None ☐ Check here if you have attached additional sheets | | | | | | | |

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| ITEM 8 RSCH 15(d)(4) | | OTHER THAN CREDIT CARD ACCOUNTS, TO WHOM MORE THAN \$3,000 WAS OWED DURING THE DISCLOSURE DIT CARD DEBT THAT EXCEEDED \$10,000 FOR SIX MONTHS OR MORE. | | | | | |
|--|---------------------------|--|---|------------------------------|--|--|--|
| NAME AND ADDRESS OF CREDITOR Central Pacific Bank 85 W.Kaahumanu Ave., Kahului, HI, 85632 | | | ORIGINAL AMOUNT OWED D | AMOUNT OWED AT END OF YEAR | | | |
| Bank of Hawaii 2105 Main St., Wailuku, HI, 96793 | | | D | С | | | |
| | | | | | | | |
| | Check here if entry is No | one | re 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 VALU | JE OF \$10,000 OR MORE. | | | |
| | | POSTAL ZIP CODE OF LOCAT | ION | VALUE | | | |
| 96753 96753 | | | | I E | | | |
| 90733 | | | | _ | | | |
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| | Check here if entry is No | one Check he | re if you have attached additional sheets | | | | |
| ITEM 10 RSCH 15(d)(5) | REAL PROPERTY, T | HE FAIR MARKET VALUE OF WI | HICH EXCEEDS \$10,000, ACQUIRED DURIN | IG THE DISCLOSURE PERIOD. | | | |
| POSTAL ZIP CODE OF LOCATION | | | ME AND ADDRESS OF PERSON RECEIVIN | G CONSIDERATION GIVEN | | | |
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| Check here if entry is None | | | | | | | |
| ITEM 11 RSCH 15(d)(5) | REAL PROPERTY, T | HE FAIR MARKET VALUE OF W | HICH EXCEEDS \$10,000, TRANSFERRED D | URING THE DISCLOSURE PERIOD. | | | |
| POSTAL ZIP CODE OF LOCATION NAME AND ADDRESS OF PE | | SON FURNISHING CONSIDERATION | CONSIDERATION RECEIVED | | | | |
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| ☐ Check here if entry is None ☐ Check here if you have 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. | | | | | | | |
|--|--|---------------------------------|----------------------|-----------------|--|--|--|--|
| N | AME OF BUSINESS | NATURE OF BUSINESS | NATURE OF INTEREST | VALUE | | | | |
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| ∠ c | heck here if entry is None | Check here if you have attach | ed additional 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 | DESCRIPTION | ON OF GIFT | ESTIMATED VALUE | | | | |
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| Z c | heck here if entry is None | ☐ Check here if you have attach | ad additional abouts | | | | | |
| ITEM 14 | neck here if entry is None | Check here if you have attach | eu additional Sheets | | | | | |
| RSCH 15(d)(8) & 22(h) | FULL-TIME JUDGES' APPROVED JUDICIAL EDUCATION | | | | | | | |
| I attended18 hours of Approved Judicial Education during the reporting period. | | | | | | | | |
| REMARKS: | | | | | | | | |
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| See attached sheets. | | | | | | | | |
| CERTIFICATION: I hereby certify that the above is a true, correct, and complete statement. | | | | | | | | |
| SIGNATURE: /s/ Kelsey T. Kawano DATE: April 18, 2012 | | | | | | | | |
| NOTE: This filing is not valid without a signature. | | | | | | | | |

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