REME	Ee,		FINANCIAL DISCLOSURE STATEMENT		
	▲ [1] 417 SC	OURT CLERK'S OFFICE DUTH KING STREET .U, HAWAI'I 96813-2912	FILING FORM	TO BE Electronically File PER DEM JUDGES. Supreme Court	
FOF	HAW		THIS SPA	CE FORSOF Dut 1000023	
			DATE RECEI	VED 29-APR-204MBER	
including the		ctions for Financial Disclosure Statement, IINDER: For all items requiring a monetary e used.	,	03:15 PM	
C - At least \$1 D - At least \$2 E - At least \$5	1,000 but less than \$10,000 H - 10,000 but less than \$25,000 I - 25,000 but less than \$50,000 J -,	At least \$150,000 but less than \$250,000 At least \$250,000 but less than \$500,000 At least \$500,000 but less than \$750,000 At least \$750,000 but less than \$1,000,000 \$1,000,000 or more			
		(Type or Print Clearly)			
AME:	LAST)	<u>ehore</u> (First)	H. (MIDDLE)	AME OF SPOUSE:	
FFICE ADDR	•	kea Street	· · · · · · · · · · · · · · · · · · ·	KHChing	
ITY OR TOW	N Hondulu	141 ZIP CODE: _90	10	o nol include names)	
Per 1	SITION HELD DAT	e of appointment - C.H. 05/97	оffice рно 538	ne ~5001	
EM 1 SCH 15(d)(1)	JUDICIAL COMPENSATION	URE 2010			
EM 2 SCH 15(d)(1)	JUDGE'S OTHER INCOME (if income for services rendered exceeds \$1,000)	EMPLOYER/LAW FIRM BU	SINESS ADORESS	ANNUAL INCOME	
		self-employed		В	
TEM 3 RSCH 15(d)(1)	INCOME OF SPOUSE OR DOMESTIC PARTNER AND DEPENDENT CHILDREN (if	EMPLOYER		ANNUAL INCOME	
	income for services rendered exceeds \$1,000)	self-employed		I	
				2011 APR 28	
101 (01/10) ographics (02	2/10)	<u>1                                    </u>		Page SC-P-20 SC-P-20	

o

ANY OTHER INCOME, FOR SERVICES RENDERED. IN EXCESS OF \$1,000 - INCOME DISCLOSED IN ITEMS 1 - 3 NEED NOT BE ITEM RSCH 15(d)(1) REPEATED HERE SOURCE AMOUNT NATURE OF SERVICES RENDERED 🗶 Check here if entry is None O Check here if you have atlached additional sheets ITEM 5 EACH OWNERSHIP OR BENEFICIAL INTEREST, HELD IN ANY BUSINESS CARRYING ON BUSINESS IN THE STATE, HAVING A RSCH 15(d)(2) VALUE OF \$5,000 OR MORE OR EQUAL TO 10% OF THE OWNERSHIP OF THE BUSINESS NAME OF BUSINESS NATURE OF INTEREST ENTER AMOUNT NATURE OF BUSINESS OR NO. OF SHARES KH Ching Corporation Prof. service KHC Family Limited Pastnershy Reutals EKKC Corporation Reutals 100% 100% 50% O Check here if entry is None O Check here if you have attached additional sheets OWNERSHIP OR BENEFICIAL INTEREST UNDER ITEM 5 TRANSFERRED DURING THIS DISCLOSURE PERIOD. ITEM 6 RSCH 15(d)(2) DATE OF TRANSFER 😡 Check here if entry is None O Check here if you have attached additional sheets ITEM 7 LIST EACH OFFICERSHIP, DIRECTORSHIP, TRUSTEESHIP OR OTHER FIDUCIARY RELATIONSHIP HELD IN ANY BUSINESS. RSCH 15(d)(3) COMPENSATION NAME OF BUSINESS TITLE AND TERM OF OFFICE (enter amount or NONE) KH Ching Corp ETC Management Corp President O Check here if entry is None O Check here if you have attached additional sheets

EM 8 LIST CREDITORS, OTHER THAN SCH 15(d)(4) PERIOD.	CREDIT CARD ACCOUN	ITS, TO WHOM MORE THAN	N \$3,000 WAS OWE	D DURING THE DISCLOSURE
NAME AND ADDRESS OF CREDI	TOR	ORIGINAL AMOUNT O	WED AMOU	JNT OWED AT END OF YEAR
First Hawanan	Bank	Ģ	1	A
			;	
O Check here if entry is None O REAL PROPERTY IN THE STATE		ou have attached additional s		0.000 OR MORE.
CH 15(d)(5)				VALUE
0 96821 2 96817 3 96813 9 96813 9 96813			Q Q Q	
O Check here if entry is None M 10 REAL PROPERTY, THE FAIR MAF		EXCEEDS \$10,000, ACQUIF		DISCLOSURE PERIOD.
POSTAL ZIP CODE OF LOCATION	NATURE OF I	NTEREST CONSIDE	RATION GIVEN	NAME AND ADDRESS OF PERSON RECEIVING CONSIDERATION
KCheck here if entry is None	O Check here if yo			I
	RKET VALUE OF WHICH	EXCEEDS \$10,000, TRANS	FERRED DURING T	HE DISCLOSURE PERIOD.
POSTAL ZIP CODE OF LOCATION		NSIDERATION RECEIVED	FURNISHING	odress of person consideration athan Chin nolulu, Hacud

•

NAME OF BUSINESS	NATURE OF BUSINESS		VALUE
NAME OF BUSINESS	NATURE OF BUSINESS	NATURE OF INTEREST	VALUE
Check here if entry is None	O Check here if you have attach	ed additional sheets	
EM 13 SCH 15(d)(7); ile 3.13 GIFT(S) THAT MUST BE REPOI ivised Code Judicial	RTED UNDER RULE 3.13(c) OF THE HAV	ATI REVISED CODE OF JUDICIAL C	ONDUCT.
onduct :			1
SOURCE	DESCRIPTION OF GIFT		ESTIMATED VALUE
Check here if entry is None	O Check here if you have attach	ed additional sheets	
EM 14 SCH 15(d)(8) FULL-TIME JUDGES' APPROVE	D JUDICIAL EDUCATION		
22(h)			·
attended hours of Approved Judie	cial Education during the reporting pe	riod.	
	cial Education during the reporting pe	riod	

O See atlached sheets.

CERTIFICATION: I hereby certify that the above is a true, correct, and complete statement.

H.Lee SIGNATURE: 0 l c & 0

DATE

April 28,2011

NOTE: This filing is not valid without a signature.

ł