A - Less than \$ B - At least \$10 C - At least \$10 D - At least \$20 E - At least \$20 F - At least \$20 F - At least \$10	000 but less than \$10,000         H - At least \$250,000 b           ,000 but less than \$25,000         I - At least \$500,000 b           ,000 but less than \$50,000         J - At least \$750,000 b           ,000 but less than \$100,000         K -\$1,000,000 or more           0,000 but less than \$150,000         ALL FULL TIME AND PER DIEM JUDGES.	RK'S OFFICE REET 813-2912 Disclosure Statement, ms requiring a monetary but less than \$250,000 ut less than \$500,000 ut less than \$750,000 ut less than \$750,000 ut less than \$1,000,000	THIS SPACE FO EI Su S( 09	LOSURE STATEMENT PR OFFICE USE ONLY ectronically Filed upreme Court CFD-11-0000275 0-APR-2012 0:10 PM	
	<u>٣</u>	ype or Print Clearly)	·		
NAME: Hara		Ryan		OUSE OR DOMESTIC PARTNER:	
(LAST) (FIRST) (MIDDLE) OFFICE ADDRESS: 4675 Kapolei Parkway NUMBER, STREET (Do not include				dent Children:	
CITY OR TOWN:	Kapolei	DDE: 96707-3272			
JUDICIAL POSITI	DN HeldDATE OF APPOINTMENTFamily CourtJuly 18, 2000		OFFICE PHONE ) 954-8070		
CALENDAR YEAF	COVERED BY THIS DISCLOSURE: 2011				
ITEM 1 RSCH 15(d)(1)	JUDICIAL COMPENSATION			ANNUAL INCOME	
ITEM 2 RSCH 15(d)(1)	JUDGE'S OTHER INCOME (if income for services rendered exceeds \$1,000)			2012	
	EMPLOYER/LAW FIRM	BUSINESS ADD	DRESS	NUAL INCOR -9 PH 2: 44 STATE OF HAWAII	
ITEM 3 RSCH 15(d)(1)	INCOME OF SPOUSE OR DOMESTIC PARTNER AI (if income for services rendered exceeds \$1,000)	ND DEPENDENT CHILDREN			
Island Insi	Irance Companies			G 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						
Rent	SOURCE	Renta	NATURE	OF SERVICES R	ENDERED	С	AMOUNT
	Check here if entry is None	Che	ck here if you h	ave attached addition	onal sheets		
ITEM 5 RSCH 15(d)(2)	EACH OWNERSHIP OR BENEFICIAI VALUE OF \$5,000 OR MORE OR EQ					HE ST	ATE, HAVING A
Morgan S First Hawa HSFCU	NAME OF BUSINESS Electric Industry tanley Smith Barney aiian Bank Benefit Services LLC	lnv Ba	NATURE O ility vestment ink edit Unio		NATURE OF INTER Stock Retirement Retirement Savings, IRA Retirement	EST	ENTER AMOUNT OR NO. OF SHARES 300 shares G G G D
	Check here if entry is None	Che	ck here if you h	ave attached additio	onal sheets		
ITEM 6 RSCH 15(d)(2)	OWNERSHIP OR BENEFICIAL INTE	REST UNDI	ER ITEM 5 TRA		NG THIS DISCLOSURE PE	riod.	
	NAME OF BUSINESS		DATE OF	TRANSFER	VALUE	OF TR	ANSFER
Ľ	Check here if entry is None	Che	ck here if you h	ave attached additi	onal sheets		
ITEM 7 RSCH 15(d)(3)	LIST EACH OFFICERSHIP, DIRECTO	DRSHIP, TR	USTEESHIP C	R OTHER FIDUCIA	ARY RELATIONSHIP HELD	) IN AN	Y BUSINESS.
The Quee Edward N	ns Medical Center ns Health Systems . Yamasaki Trust Yamasaki Trust			Trustee (sr Trustee " Trustee " Trustee " Trustee "	AND TERM OF OFFICE		COMPENSATION (enter amount or NONE
	Check here if entry is None	🗌 Che	ck here if you h	ave attached additi	onal sheets		

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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 ADDRES	SS OF CREDITOR		ORIGINAL AMOUNT OWED	AMO	UNT OWED AT END OF YEAR	
	Check here if entry is N			vou have attached additional sheets			
17EM 9 RSCH 15(d)(5) 96822 96819		POSTAL ZIP CODE OF LO		INTEREST WITH A FAIR MARKET VAL	KC	VALUE	
ITEM 10 RSCH 15(d)(5)		HE FAIR MARKET VALUE O		vou have attached additional sheets		<u> </u>	
	ODE OF LOCATION	NATURE OF INTEREST	CONSI	AND ADDRESS OF PERSON RECEIVI	νG	CONSIDERATION GIVEN	
C	heck here if entry is No	ne 🗌 Chec	ck here if y	ou have attached additional sheets			
ITEM 11 RSCH 15(d)(5)	REAL PROPERTY, T	HE FAIR MARKET VALUE O	OF WHICH	EXCEEDS \$10,000, TRANSFERRED	OURING .	THE DISCLOSURE PERIOD.	
POSTAL ZIP C	ODE OF LOCATION		PERSON	I FURNISHING CONSIDERATION		CONSIDERATION RECEIVED	
<b>Z</b> c	heck here if entry is No	ne 🗌 Chec	ck here if y	ou have attached additional sheets			

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1TEM 12 RSCH 15(d)(6)	CREDITOR INTEREST IN INSOLVENT BUSINESS HAVING A VALUE OF \$5,000 OR MORE.							
N	NAME OF BUSINESS NATURE OF BUSINESS NATURE OF INTEREST VA							
<b>Z</b> 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	GIFT(S) THAT MUST BE REPOR	TED UNDER RULE 3.13(c) OF THE HAV	VAI'I REVISED CODE OF JUDICIAL CO	NDUCT.				
	SOURCE	DESCRIPTI	ON OF GIFT	ESTIMATED VALUE				
		ļ						
Z c	heck here if entry is None	Check here if you have attach	ed additional sheets					
ITEM 14 RSCH 15(d)(8) & 22(h)	FULL-TIME JUDGES' APPROVE							
l attended	hours of Approved Judici	al Education during the reporting pe	riod.					
REMARKS:								
□s	ee attached sheets.							
CERTIFICATIO	N: I hereby certify that the above is	a true, correct, and complete statement.	<del>, , , , , , , , , , , , , , , , , , , </del>					
······	Nancy Ryan Harada	······	in Harada DAT	<sup>E:</sup> 4/4/2012				
NOTE: This f	iling is not valid without a signature.			<del>_</del>				
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iD 101 (02/11) (ef	f. 01/01/11)			Ра				