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

FINANCIAL DISCLOSURE STATEMENT THIS SPACE FOR OFFICE USE ONLY

> **Electronically Filed Supreme Court** SCFD-11-0000276 29-APR-2011 05:02 PM

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.

CALENDAR YEAR COVERED BY THIS DISCLOSURE: 20 10

	(Type or Pr	int Clearly)	
NAME: Sakamoto	Karl	Kenji	NAME OF SPOUSE OR DOMESTIC PARTNER
(LAST)	(FIRST)	(MIDDLE)	
OFFICE ADDRESS: 777 Punc	hbowl Street		No, of Dependent Children:
	NUMBER, STREET		(Do not include names)
CITY OR TOWN: Honolulu		zip code: 96813	
JUDICIAL POSITION HELD	DATE OF APPOINTMENT	OFFICE PHONE	
Circuit Court Judge	6-1-00	539-4150	

ANNUAL INCOME ITEM 1 JUDICIAL COMPENSATION RSCH 15(d)(1) F ITEM JUDGE'S OTHER INCOME RSCH 15(d)(1) (if income for services rendered exceeds \$1,000) ANNUAL INCOME EMPLOYER/LAW FIRM **BUSINESS ADDRESS** Officiant Services C

INCOME OF SPOUSE OR DOMESTIC PARTNER AND DEPENDENT CHILDREN ITFM 3 RSCH 15(d)(1) (if income for services rendered exceeds \$1,000)

EMPLOYER ANNUAL INCOME Clinical Laboratories F

ITEM 4 RSCH 15(d)(1)	ANY OTHER INCOME, FOR SERVICES RE	ENDERED, IN EXCES	SS OF \$1,000 - INCOM	ME DISCLOSED IN ITEMS 1 -	NEED NOT BE
	SOURCE	NATURE OF SERVICES RENDERED		DERED	AMOUNT
	Check here if entry is None	Check here if you ha	ave attached additional	sheets	
ITEM 5 RSCH 15(d)(2)	EACH OWNERSHIP OR BENEFICIAL INTE VALUE OF \$5,000 OR MORE OR EQUAL	EREST, HELD IN AN' TO 10% OF THE OW	Y BUSINESS CARRYII NERSHIP OF THE BU	NG ON BUSINESS IN THE ST SINESS.	ATE, HAVING A
<u> </u>	NAME OF BUSINESS	NATURE O	F BUSINESS	NATURE OF INTEREST	ENTER AMOUNT OR NO. OF SHARES
	Check here if entry is None	Check here if you ha	ave attached additional	sheets	
ITEM 6 RSCH 15(d)(2)	OWNERSHIP OR BENEFICIAL INTEREST	UNDER ITEM 5 TRA	NSFERRED 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			
Hawaii State Federal Credit Union	Е	E			
Wells Fargo	Н	Н			
J					
Check here if entry is None Check here if	you have attached additional sheets				
REAL PROPERTY IN THE STATE IN WHICH IS HELD AN	NINTEREST WITH A FAIR MARKET VALU	E OF \$10,000 OR MORE.			
POSTAL ZIP CODE OF LOCATION	N	VALUE			
96819		1			
96822		J			
Check here if entry is None Check here i	f you have attached additional sheets				
ITEM 10 RSCH 15(d)(5) REAL PROPERTY, THE FAIR MARKET VALUE OF WHICH	CH EXCEEDS \$10,000, ACQUIRED DURIN	G THE DISCLOSURE PERIOD.			
	E AND ADDRESS OF PERSON RECEIVING	G CONSIDERATION GIVEN			
CONS	SIDERATION				
✓ 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 PERSO	ON FURNISHING CONSIDERATION	CONSIDERATION RECEIVED			
✓ Check here if entry is None					

JUD 101 (02/11) (eff. 01/01/11)

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		
✓ 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 GIFT(S) THAT MUST BE REPORTED UNDER RULE 3.13(c) OF THE HAWAI'I REVISED CODE OF JUDICIAL CONDUCT. Revised Code of Judicial					
	SOURCE	DESCRIPTI	ON OF GIFT	ESTIMATED VALUE		
	Check 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' APPROVED) JUDICIAL EDUCATION				
I attended 11 hours of Approved Judicial Education during the reporting period.						
REMARKS:						
See attached sheets.						
SIGNATURE:	X	a true, correct, and complete statement.	DATE: 3-18	-11		

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