

## SUPREME COURT CLERK'S OFFICE 417 SOUTH KING STREET

HONOLULU, HAWAI'I 96813-2912

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
- F At least \$100,000 but less than \$150,000
- E At least \$50,000 but less than \$100,000

TO BE FILED BY ALL FULL TIME AND PER DIEM JUDGES.

- 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

FINANCIAL DISCLOSURE STATEMENT

THIS SPACE FOR OFFICE USE ONLY

**Electronically Filed Supreme Court** SCFD-11-0000220 27-APR-2012 04:42 PM

(Type or Print Clearly)						
	vamura (Shimizu) Shirley	Miki	NAME OF SPOUSE OR DOMESTIC PARTNER:  Jason Y. Shimizu			
OFFICE ADDRES	ss: 1111 Alakea St.		No. of Dependent Children: (Do not include names)			
CITY OR TOWN:	Honolulu	ZIP CODE: 96813	2 CLERN CLERN			
JUDICIAL POSIT		MENT OFFICE 538-500	(*(1)			
CALENDAR YEA	R COVERED BY THIS DISCLOSURE: 20_11					
ITEM 1 RSCH 15(d)(1)	JUDICIAL COMPENSATION		D 20 0			
ITEM 2 RSCH 15(d)(1)	JUDGE'S OTHER INCOME (if income for services rendered exceeds \$1,00	00)	\(\sigma_1\)			
	EMPLOYER/LAW FIRM	BUSINESS ADDRESS	ANNUAL INCOME			
Kawashir	na Lorusso, LLP	745 Fort Street Suite 500 Honolulu, HI 96813	D			
ITEM 3 RSCH 15(d)(1)	INCOME OF SPOUSE OR DOMESTIC PARTNER AND DEPENDENT CHILDREN (if income for services rendered exceeds \$1,000)					
Hawaii Ro	E ANNUAL INCOME					

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	NATURI	E OF SERVICES REN	IDERED	AMOUNT
	Check here if entry is None	Check here if you h	nave attached addition	al sheets	
ITEM 5 RSCH 15(d)(2)	EACH OWNERSHIP OR BENEFICIAL VALUE OF \$5,000 OR MORE OR EQU				E STATE, HAVING A
	NAME OF BUSINESS	NATURE C	OF BUSINESS	NATURE OF INTERES	ST ENTER AMOUNT OR NO. OF SHARES
	Check here if entry is None	Check here if you h	ave attached addition	al sheets	
ITEM 6 RSCH 15(d)(2)	OWNERSHIP OR BENEFICIAL INTER	EST UNDER ITEM 5 TRA	NSFERRED DURING	THIS DISCLOSURE PER	IOD.
	NAME OF BUSINESS	DATE OF	TRANSFER	VALUE O	F TRANSFER
	Check here if entry is None	Check here if you h	ave attached additiona	al sheets	
ITEM 7 RSCH 15(d)(3)	LIST EACH OFFICERSHIP, DIRECTOR	RSHIP, TRUSTEESHIP O	R OTHER FIDUCIAR	Y RELATIONSHIP HELD II	N ANY BUSINESS.
<b>□</b>	NAME OF BUSINESS  Check here if entry is None	☐ Check here if you h.	TITLE ANI	D TERM OF OFFICE	COMPENSATION (enter amount or NONE)

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## Item 5:

NAME OF BUSINESS NATUL	RE OF BUSINESS	NATURE OF INTEREST	AMOUNT/NO. OF SHARES
Royal Gold Inc.	Gold	Stock Investment	С
Silver Wheaton Corp.	Silver	Stock Investment	Е
Oppenheimer Gold & Spl Mi	in A	Mutual Funds	Е
Sabine Royalty Tr Units Ben		Investment	D
San Juan Basin Royalty Trus	t	Investment	В
Kane & Dekalb Cntys IL Sch	GO	Municipal Bonds	C
Oppenheimer Amt Free Mun	is A	Mutual Funds	В
Hawaii Carpenters Financial	Security Fund	Retirement	Е

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 ADDRES	SS OF CREDITOR		ORIGINAL AMOUNT OWED	AMO	UNT OWED AT END OF YEAR
			ļ			
	Check here if entry is N	one 📝 Chec	ck here if y	you have attached additional sheets		
ITEM 9	-			INTEREST WITH A FAIR MARKET VAL	UE OF \$1	
RSCH 15(d)(5)		POSTAL ZIP CODE OF LO	CATION			VALUE
96821			, , , , , , , , , , , , , , , , , , , ,		K	W.EGE
96815					Н	
96815					Н	
	Check here if entry is No	one Chec	ck here if y	you have attached additional sheets		-
ITEM 10 RSCH 15(d)(5)	REAL PROPERTY, T	HE FAIR MARKET VALUE O	F WHICH	I EXCEEDS \$10,000, ACQUIRED DURI	IG THE [	DISCLOSURE PERIOD.
	ODE OF LOCATION	NATURE OF INTEREST		E AND ADDRESS OF PERSON RECEIVING		CONSIDERATION GIVEN
Check here if entry is None Check here if you have attached additional sheets						
ITEM 11 REAL PROPERTY, THE FAIR MARKET VALUE OF WHICH EXCEEDS \$10,000, TRANSFERRED DURING THE DISCLOSURE PERIOD, RSCH 15(d)(5)						
POSTAL ZIP CODE OF LOCATION NAME AND ADDRE			PERSON	FURNISHING CONSIDERATION		CONSIDERATION RECEIVED
Check here if entry is None Check here if you have attached additional sheets						

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## Item 8:

Name and Address of Creditor	Original Amount	End of Year
Hawaii State Federal Credit Union 560 Halekauwila St. Honolulu, HI 96813	D	D
1101101tulu, 111 90613		
Citicards	C	C
P.O. Box 6500 Sioux Falls,SD 57117-6500		
Hawaii USA FCU	E	E
1226 College Walk		
Honolulu, HI 96817		
American Education Services	A	A
1200 North 7th Street		
Harrisburg, PA 17102		
FIA Cardservices	В	В
P.O. Box 15019		
Wilmington, DE 19850–5019		

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	VALUE				
<b>∠</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	RSCH 15(d)(7): Rule 3.13 GIFT(S) THAT MUST BE REPORTED UNDER RULE 3.13(c) OF THE HAWAI') REVISED CODE OF JUDICIAL CONDUCT. Revised Code of Judicial						
	SOURCE	DESCRIPTI	ON OF GIFT	ESTIMATED VALUE			
	heck here if entry is None						
	neck nere 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 attendedn/a hours of Approved Judicial Education during the reporting period.							
REMARKS:	<u> </u>						
☐ See attached sheets.							
CERTIFICATION: I hereby certify that the above is a true, correct, and complete statement.							
SIGNATURE: DATE: 4/25/12							
NOTE: This filing is not valid without a signature.							

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