



FORM
GD1
(Rev. 5/2013)

Hawaii State Ethics Commission Received
6/20/2013 6:42:00 PM



HAWAII STATE ETHICS COMMISSION GIFTS DISCLOSURE STATEMENT

(This report covers the period from June 1 of the preceding calendar year through June 1 of this year and is due by June 30)

FILER

Shimizu	Debra	K
Last Name	First Name	M.I.
Office of the Governor	Policy Analyst	
State Agency	State Position	

CONTACT INFORMATION

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Telephone	Extension	Email Address

GIFT INFORMATION (LIST EACH GIFT SEPARATELY)

- | | | |
|----|---|----------------------------------|
| 1. | Donor: <u>National Governors' Association</u> | Date Received: <u>10/25/2012</u> |
| | Gift (Description): <u>round trip airfare Honolulu to New Orleans, LA</u> | Value/Cost: <u>\$733</u> |
| 2. | Donor: <u>National Governors' Association</u> | Date Received: <u>10/25/2012</u> |
| | Gift (Description): <u>Lodging (3 nights)</u> | Value/Cost: <u>\$346</u> |
| 3. | Donor: <u>National Governors' Association</u> | Date Received: <u>10/25/2012</u> |
| | Gift (Description): <u>ground transportation</u> | Value/Cost: <u>\$38</u> |
| 4. | Donor: <u>National Governors' Association</u> | Date Received: <u>10/25/2012</u> |
| | Gift (Description): <u>airline check bag fee</u> | Value/Cost: <u>\$50</u> |
| 5. | Donor: <u>National Governors' Association</u> | Date Received: <u>10/25/2012</u> |
| | Gift (Description): <u>per diem</u> | Value/Cost: <u>\$12</u> |

Check here if additional sheets are attached

FILER

<u>Debra K. Shimizu</u>	<u>06/20/2013</u>
Print Name of Filer (First M.I. Last)	Date (m/d/yyyy)

CERTIFICATION: By checking this box, you signify and affirm that you are the person whose name appears as the "Filer" above and the information contained in the form is true, correct and complete to the best of your knowledge and belief. You further certify that you understand that there are statutory penalties for failing to report the information required by Hawaii law.