



FORM
GD1
(Rev. 5/2012)



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)

13 JUN 12 P3:54

STATE OF HAWAII
STATE ETHICS COMMISSION

FILER

ACIDO	Jeffrey	
Last Name	First Name	M.I.
University of Hawai'i--Board of Regents Office	University Regent	
State Agency	State Position	

CONTACT INFORMATION

University of Hawai'i--Board of Regents Office

2444 Dole Street, Bachman Hall 209

Number and Street or P.O. Box

Honolulu	HI	96822
City	State	Zip Code
(808) 956-8213	bor@hawaii.edu	
Telephone	Extension	Email Address

GIFT INFORMATION (LIST EACH GIFT SEPARATELY)

1. Donor: _____ Date Received: _____
Gift (Description): _____ Value/Cost: _____
2. Donor: _____ Date Received: _____
Gift (Description): _____ Value/Cost: _____
3. Donor: _____ Date Received: _____
Gift (Description): _____ Value/Cost: _____
4. Donor: _____ Date Received: _____
Gift (Description): _____ Value/Cost: _____
5. Donor: _____ Date Received: _____
Gift (Description): _____ Value/Cost: _____

Check here if additional sheets are attached

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

Signature

Date 6/1/13