



FORM
GD1
(Rev. 5/2013)



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 -6 P12:42

STATE OF HAWAII
STATE ETHICS COMMISSION
J.C.
M.I.

FILER

Aquino

Henry

Last Name

First Name

HI State House of Representatives

Representative

State Agency

State Position

CONTACT INFORMATION

415 S. Beretania Street, Rm. 419

Number and Street or P.O. Box

Honolulu

HI

96813

City

State

Zip Code

(808) 586-6520

repaquino@capitol.hawaii.gov

Telephone

Extension

Email Address

GIFT INFORMATION (LIST EACH GIFT SEPARATELY)

1. Donor: NCSL Military/Vet. Affair Task Force Meeting Date Received: May 17-18, 2012
Gift (Description): Hotel/Airfare/Ground Transportation Value/Cost: \$1,296.99
2. Donor: NCSL Symposium for Emerging Leaders Date Received: Sept. 18-21, 2012
Gift (Description): Hotel/Airfare Value/Cost: \$1,141.70
3. Donor: NCSL Military/Vet. Affair Task Force Meeting Date Received: Dec. 4 - 6, 2012
Gift (Description): Hotel/Airfare/Ground Transportation Value/Cost: \$1,551.09
4. Donor: _____ Date Received: _____
Gift (Description): _____ Value/Cost: _____
5. Donor: _____ Date Received: _____
Gift (Description): _____ Value/Cost: _____

Check here if additional sheets are attached

FILER

6/4/2013

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.