



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 10 A11:56

STATE OF HAWAII
STATE ETHICS COMMISSION

FILER

KUDO Benjamin
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

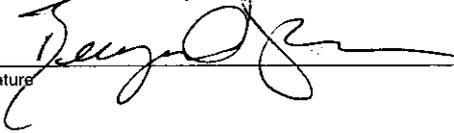
(808) 956-8213 bor@hawaii.edu
Telephone Extension Email Address

GIFT INFORMATION (LIST EACH GIFT SEPARATELY)

1. Donor: None 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.

 June 6, 2013
Signature Date

RECEIVED BY U.S. MAIL