



FORM
GD1
(Rev. 5/2012)



HAWAII STATE ETHICS COMMISSION GIFTS DISCLOSURE STATEMENT

'13 JUN 10 AM 11:56

(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)

STATE OF HAWAII
STATE ETHICS COMMISSION

FILER

MATAYOSHI

Coralie

Last Name

First Name

M.I.

University of Hawai'i--Board of Regents Office

University Regent

State Agency

State Position

CONTACT INFORMATION

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Number and Street or P.O. Box

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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): none 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

6/8/13