



FORM  
GD1  
(Rev. 5/2012)



# HAWAII STATE ETHICS COMMISSION GIFTS DISCLOSURE STATEMENT

'13 MAY 30 P6:23

(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

OTA	Saedene	
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)

- Donor: University of Hawaii--Athletics Department Date Received: Feb & Apr 2013  
 Gift (Description): 1 ticket men's basketball and 1 ticket baseball Value/Cost: \$48.00
- Donor: \_\_\_\_\_ Date Received: \_\_\_\_\_  
 Gift (Description): \_\_\_\_\_ Value/Cost: \_\_\_\_\_
- Donor: \_\_\_\_\_ Date Received: \_\_\_\_\_  
 Gift (Description): \_\_\_\_\_ Value/Cost: \_\_\_\_\_
- Donor: \_\_\_\_\_ Date Received: \_\_\_\_\_  
 Gift (Description): \_\_\_\_\_ Value/Cost: \_\_\_\_\_
- 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

5/28/13