



FORM
GD1
(Rev. 5/2012)



HAWAII STATE ETHICS COMMISSION GIFTS DISCLOSURE STATEMENT

'13 APR -9 P2 :29

(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

Tamanaha	Charlene	L.K.
Last Name	First Name	M.I.
Dept of Commerce & Consumer Affairs	Executive Officer	
State Agency	State Position	

CONTACT INFORMATION

335 Merchant Street

Room 341

Number and Street or P.O. Box

Honolulu HI 96813

City State Zip Code

(808) 586-2705 charlene.lk.tamanaha@dcca.hawaii.gov

Telephone Extension Email Address

GIFT INFORMATION (LIST EACH GIFT SEPARATELY)

- Donor: Hawaii Hotel Visitor Industry Security Assn-Big Is Date Received: 4/12/13
Gift (Description): airfare to Kona Value/Cost: \$186.20
- Donor: Hawaii Hotel Visitor Industry Security Assn-Maui Date Received: 2/9/12
Gift (Description): airfare to Maui Value/Cost: \$177.60
- 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.

Charlene L. Tamanaha

Signature

4/3/2013

Date

RECEIVED BY U.S. MAIL