



**FORM
GD1**
(Rev. 5/2013)

Hawaii State Ethics Commission Received
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**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)

FILER

Okazaki	Wendy	K
Last Name	First Name	M.I.
Health	Recycling Coordinator	
State Agency	State Position	

CONTACT INFORMATION

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Rm. 212
Number and Street or P.O. Box

Honolulu	HI	96814
City	State	Zip Code
586-4226	wendy.okazaki@doh.hawaii.gov	
Telephone	Extension	Email Address

GIFT INFORMATION (LIST EACH GIFT SEPARATELY)

- Donor: Consumer Electronics Association Date Received: January 7-10, 2014
Gift (Description): Registration for the Consumer Electronics Show Value/Cost: \$200.00
- Donor: Consumer Electronics Association Date Received: January 7-10, 2014
Gift (Description): Airfare to attend the CES Value/Cost: \$644.50
- Donor: Consumer Electronics Association Date Received: January 7-10, 2014
Gift (Description): Lodging while attending the CES Value/Cost: \$1,004.64
- Donor: Consumer Electronics Association Date Received: January 7-10, 2014
Gift (Description): Ground transportation while attending the CES Value/Cost: \$50.00
- Donor: Consumer Electronics Association Date Received: January 7-10, 2014
Gift (Description): Meals while attending the CES Value/Cost: \$350.98

Check here if additional sheets are attached

FILER

<u>Wendy K Okazaki</u>	<u>1/21/2014</u>
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.