



FORM  
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(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

Shibata	Corey	B
Last Name	First Name	M.I.
Dept of Accounting & General Services, CSD	Engineer V	
State Agency	State Position	

### CONTACT INFORMATION

729 Kakoi Street		
Number and Street or P.O. Box		
Honolulu	HI	96819
City	State	Zip Code
808-381-0147	corey.b.shibata@hawaii.gov	
Telephone	Extension	Email Address

### GIFT INFORMATION (LIST EACH GIFT SEPARATELY)

- |    |   |   |
|----|---|---|
| 1. | Donor: <u>Accuity Brands</u>                                | Date Received: <u>10/19/14</u>            |
|    | Gift (Description): <u>airfare from Honolulu to Atlanta</u> | Value/Cost: <u>\$900</u>                  |
| 2. | Donor: <u>Accuity Brands</u>                                | Date Received: <u>10/20/14 - 10/23/14</u> |
|    | Gift (Description): <u>lodging at Atlanta</u>               | Value/Cost: <u>\$300</u>                  |
| 3. | Donor: <u>Accuity Brands</u>                                | Date Received: <u>10/20/14 - 10/23/14</u> |
|    | Gift (Description): <u>meals at Atlanta</u>                 | Value/Cost: <u>\$50</u>                   |
| 4. | Donor: <u>Accuity Brands</u>                                | Date Received: <u>10/20/14 - 10/23/14</u> |
|    | Gift (Description): <u>ground transportation at Atlanta</u> | Value/Cost: <u>\$25</u>                   |
| 5. | Donor: _____  | Date Received: _____                      |
|    | Gift (Description): _____                                   | Value/Cost: _____                         |

Check here if additional sheets are attached

### FILER

<u>Corey B. Shibata</u>	<u>11/17/2014</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.