



FORM GD1 (Rev. 5/2013)

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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)

STATE OF HAWAII STATE ETHICS COMMISSION

FILER Hee Clayton H.W. Last Name First Name M.I. Hawaii State Senate State Senator State Agency State Position

CONTACT INFORMATION State Capitol, Room 407 415 S. Beretania Street Number and Street or P.O. Box Honolulu HI 96813 City State Zip Code (808) 586-7330 senhee@capitol.hawaii.gov Telephone Extension Email Address

- GIFT INFORMATION (LIST EACH GIFT SEPARATELY) 1. Donor: Gill Action LLC Date Received: 5/1/14 - 5/3/14 Gift (Description): Roundtrip Flight from HNL to LAX Value/Cost: \$552.40 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

FILER CLAYTON H.W. HEE 5/16/14 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.

REC'D BY FAX