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STATE OF HAWAII
STATE ETHICS COMMISSION

FORM
GD1
(Rev. 5/2013)

AMENDED

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

Last Name	First Name	M.I.
Souki	Joseph	M.

State Agency	State Position
Hawaii State Legislature	Speaker of the House

CONTACT INFORMATION

415 S. Beretania Street, Rm. 431
Number and Street or P.O. Box

City	State	Zip Code
Honolulu	HI	96813

Telephone	Extension	Email Address
(808) 586-6100		repsouki@capitol.hawaii.gov

GIFT INFORMATION *(LIST EACH GIFT SEPARATELY)*

1. Donor: Taiwan Government — Date Received: June 17-23, 2013
   Gift (Description): visit Taipei — Value/Cost: ~~$4,500~~ $5,000
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

Joseph M. Souki — ~~6/18/2014~~ 6/24/2014

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 STATE MESSENGER