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STATE OF HAWAII
STATE ETHICS COMMISSION

FORM
GD1
(Rev. 6/2013)

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.
Santo	Paul	T

State Agency	State Position
Department of Transportation	Engineer (Structural) VI

CONTACT INFORMATION

601 Kamokila Blvd., Room 611
Number and Street or P.O. Box

City	State	Zip Code
Kapolei	HI	96707

Telephone	Extension	Email Address
(808) 692-7611		paul.santo@hawaii.gov

GIFT INFORMATION *(LIST EACH GIFT SEPARATELY)*

1. Donor: SSFM International, Inc. Date Received: 6/18/2010
   Gift (Description): Payment for golf tournament fees. Value/Cost: $220.00
2. Donor: SSFM International, Inc. Date Received: 6/21/2011
   Gift (Description): Payment for golf tournament fees. Value/Cost: $233.33
3. Donor: Ameron Hawaii Date Received: 5/27/2011
   Gift (Description): Payment for golf tournament fees. Value/Cost: $250.00
4. Donor: Date Received:
   Gift (Description): Value/Cost:
5. Donor: Date Received:
   Gift (Description): Value/Cost:

☐ Check here if additional sheets are attached

FILER

Paul T. Santo — Print Name of Filer *(First M.I. Last)*

~~5/14/2014~~ 7/11/2014 — 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.

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