# HAWAII STATE ETHICS COMMISSION DISCLOSURE OF FINANCIAL INTERESTS: LONG FORM

FILER						
Cabral Nar			CV		Suzan	
Last Nan		First I	•	M.I.		
FOR ST	ATE EMPLOYEES	I	FOR STAT	E BOARD/COMMISSIO	ON MEMBERS	
Department			Hawaii Public Housing Authority Board/Commission Name 07/01/2015			
Division			BEGIN END Term of Office (mm/dd/yyyy)			
Position						
USE /	DR EACH ITEM, EXCEPT ITEM 9, DIS ABBREVIATIONS: "F" for filer, "SP" for sp ITEM 1: INCOME FOR SI urce and amount of all income of \$1,000 EARNED FROM YOUR STATE POSITION	pouse, "DC" for depe ERVICES RENDER or more received du	ndent children,  ED FOR PRECING the precedi	and "JT" for joint interests of the CEDING CALENDAR YEAR ng calendar year for services in the control of the co	he spouse and filer.	
F,SP, DC,JT			AMOUNT	SERVICES RENDERED		
Che	eck here if entry is None		✓	Check here if additional	sheets are attached	
State if the	ITEM 2: OWNERS nount and identity of every ownership or to enterest has a value of \$5,000 or more of STOCKS, MUTUAL FUNDS OR OTHER e instructions available at http://ethics.hav	beneficial interest hel or is equal to 10% or i NON-RETIREMENT	d during the dis	nership of the business. YOU	ARE REQUIRED TO	
F,SP, DC,JT	NAME OF BUSINESS	NATURE OF B	USINESS	NATURE OF INTEREST	VALUE OR NO. OF SHARES	
			-			
Che	eck here if entry is None		<b>√</b>	Check here if additional	sheets are attached	

ITEM 3: TRANSFER OF OWNERSHIP OR BENEFICIAL INTERESTS IN BUSINESSES List any ownership or beneficial interests in businesses transferred during the disclosure period and the date of transfer.

F,SP, DC,JT	OWNERSHIP OR BENEFICIAL INTEREST TR	RANSFERRED DURING THIS D	DISCLOSURE PERIOD	DATE OF TRANSFER	
	ck here if entry is None		Check here if additiona	al sheets are attached	
List the nar	me of each creditor to whom the value of \$3,0 tstanding. Exclude debts from retail installmen	ITEM 4: CREDITORS 000 or more was owed during nt transactions for the purchas	the disclosure period and the se of consumer goods.	original amount and	
F,SP, DC,JT	NAME OF CREDITOR		ORIGINAL AMOUNT OWED	AMOUNT OUTSTANDING	
Check here if entry is None  ✓ Check here if additional sheets are attached  ITEM 5: OFFICERSHIPS, DIRECTORSHIPS, TRUSTEESHIPS  List every officership, directorship, trusteeship, or other fiduciary relationship held during the disclosure period in any business or					
organizatio	on, the term of office, and the annual compens		ng the disclosure period in an	y business of	
F,SP, DC,JT	NAME OF BUSINESS	TITLE HELD	TERM OF OFFICE	ANNUAL COMPENSATION	
Cha	ck here if entry is None		Check here if additions	al sheets are attached	

ITEM 6: INTERESTS IN REAL PROPERTY HELD, EXCLUDING PERSONAL RESIDENCE(S)
List interests in real property in or outside of the State held during the disclosure period, if the interest has a value of \$10,000 or more. Real

property the	at is your personal residence or the personal residence of	your spouse or dependent childre	en need not be listed.
F,SP, DC,JT	STREET ADDRESS	TAX MAP KEY NUMBER (IF TAX KEY NUMBER EXISTS)	( MAP VALUE
-,-			
Che	ck here if entry is None	✓ Check here	if additional sheets are attached
	ITEM 7: INTERESTS IN REAL PROPERTY ACQ ts in real property in or outside of the State acquired during try that is your personal residence or the personal residence	the disclosure period, if the inter	rest has a value of \$10,000 or more.
F,SP, DC,JT	STREET ADDRESS AND TAX MAP KEY NUMBER (IF TAX MAP KEY NUMBER EXISTS)	AMOUNT & NATURE OF CONSIDERATION PAID	NAME OF PERSON RECEIVING THE CONSIDERATION
	,		
Che	ck here if entry is None	✓ Check here	if additional sheets are attached
1 1-4 1-4	ITEM 8: INTERESTS IN REAL PROPERTY TRANS		
	ts in real property in or outside of the State transferred duri crty that was your personal residence or the personal residence		
F,SP, DC,JT	STREET ADDRESS AND TAX MAP KEY NUMBER (IF TAX MAP KEY NUMBER EXISTS)	AMOUNT & NATURE OF CONSIDERATION RECEIVED	NAME OF PERSON FURNISHING THE CONSIDERATION
✓ Che	ck here if entry is None	Check here	if additional sheets are attached

## ITEM 9: CLIENTS PERSONALLY REPRESENTED BEFORE STATE AGENCIES

List the names of clients personally represented by you before state agencies, except in ministerial matters, for a fee or compensation during the disclosure period, excluding clients represented before courts.

NAME OF CLIENT		NAME OF STATE AGENCY				
✓ Che	ck here if entry is None		Che	ck here if a	dditional she	ets are attached
ITEM 10: CREDITOR INTERESTS IN INSOLVENT BUSINESSES List the amount and identity of every creditor interest in insolvent businesses, held during the disclosure period, if the interest has a value o \$5,000 or more.				rest has a value of		
F,SP, DC,JT	NAME OF BUSINESS		NATURE OF BUSINESS	NATURE OF	FINTEREST	VALUE
C) Cha	ak hara if antw in Nava			ak hava if a		
[✓] Che	ck here if entry is None		Che	ck here if a	dditional she	ets are attached
FILER						
Nancy Suzanne Cabral			07/10/2015			2015
Type Name of Filer (First, M.I., Last)(Signature required on this line if you are filing a paper form)  Date (m/d/yyyy)				/уууу)		

CERTIFICATION: By checking this box or signing your name on this form, 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.

Check all that apply. - State Board/Commission Member

Department

Division

**State Employee Position** 

State Board or Commission Name Hawaii Public Housing Authority

Term of Office Start Jul 01, 2015

**Term of Office End** 

#### Category 1: Income for services rendered for preceding calendar year Yes, I have items

#### START Item #1 Who holds interest? Filer

Item #1 Name of Employer/ Other source of income Day-Lum Rentals & Management, Inc.

Item #1 Compensation received E : At least \$50,000 but less than \$100,000

Item #1 Description of services rendered Independent Contractor and consultant for real estate property management firm. Assist with overseeing real estate management company that does residential property management, commercial property management, subdivision and condominium property management and assisted housing management.

#### START Item #2 Who holds interest? Joint

Item #2 Name of Employer/ Other source of income self

Item #2 Compensation received E: At least \$50,000 but less than \$100,000

Item #2 Description of services rendered Income from residential and commercial investment and rental properties owned by self and husband.

START Item #3 Who holds interest? Spouse

Item #3 Name of Employer/ Other source of income Retirement & Social Security

Item #3 Compensation received D : At least \$25,000 but less than \$50,000

Item #3 Description of services rendered Retirement from Hawaii Electric Industries and Social Security

START Item #4 Who holds interest?

Item #4 Name of Employer/ Other source of income

Item #4 Compensation received

Item #4 Description of services rendered

START Item #5 Who holds interest?

Item #5 Name of Employer/ Other source of income

Item #5 Compensation received

Item #5 Description of services rendered

#### Category 2: Ownership or Beneficial Interests in Businesses Yes, I have items

#### START Item #1 Who holds interest? Filer

Item #1 Legal name of business Day-Lum, Inc.

Item #1 Nature of business Real estate company that owns Day-Lum Rentals & Management, Inc. and Day-Lum Properties, Inc.

Item #1 Nature of interest Real estate sales & management

Item #1 Value of interest J: At least \$750,000 but less than \$1,000,000

Item #1 Number of Shares 100.0

START Item #2 Who holds interest? Joint

Item #2 Legal name of business self owner of real estate investments properties

Item #2 Nature of business own real property for monthly income and future resale.

Item #2 Nature of interest future sales value

Item #2 Value of interest I: At least \$500,000 but less than \$750,000

Item #2 Number of Shares

START Item #3 Who holds interest?

Item #3 Legal name of business

Item #3 Nature of business

Item #3 Nature of interest

Item #3 Value of interest

Item #3 Number of Shares

START Item #4 Who holds interest?

Item #4 Legal name of business

Item #4 Nature of business

Item #4 Nature of interest

Item #4 Value of interest

Item #4 Number of Shares

START Item #5 Who holds interest?

Item #5 Legal name of business

Item #5 Nature of business

Item #5 Nature of interest

Item #5 Value of interest

Item #5 Number of Shares

START Item #1 Who holds interest?

Item #1 Ownership or beneficial interest transferred during this disclosure period

Item #1 Date of transfer

START Item #2 Who holds interest?

Item #2 Ownership or beneficial interest transferred during this disclosure period

Item #2 Date of transfer

START Item #3 Who holds interest?

Item #3 Ownership or beneficial interest transferred during this disclosure period

Item #3 Date of transfer

START Item #4 Who holds interest?

Item #4 Ownership or beneficial interest transferred during this disclosure period

Item #4 Date of transfer

START Item #5 Who holds interest?

Item #5 Ownership or beneficial interest transferred during this disclosure period

Item #5 Date of transfer

#### Category 4: Creditors Yes, I have items

START Item #1 Who holds interest? Joint

Item #1 Legal name of creditor First Hawaiian Bank

Item #1 Original amount owed I : At least \$500,000 but less than \$750,000

Item #1 Amount outstanding H: At least \$250,000 but less than \$500,000

START Item #2 Who holds interest?

Item #2 Legal name of creditor

Item #2 Original amount owed

Item #2 Amount outstanding

START Item #3 Who holds interest?

Item #3 Legal name of creditor

Item #3 Original amount owed

Item #3 Amount outstanding

START Item #4 Who holds interest?

Item #4 Legal name of creditor

Item #4 Original amount owed

Item #4 Amount outstanding

START Item #5 Who holds interest?

Item #5 Legal name of creditor

Item #5 Original amount owed

Item #5 Amount outstanding

#### Category 5: Officerships, Directorships, Trusteeships Yes, I have items

START Item #1 Who holds interest? Filer

Item #1 Legal name of entity H.C. Shipman Foundation

Item #1 Title held President

Item #1 Term of Office 1 year

Item #1 Annual compensation

START Item #2 Who holds interest? Filer

Item #2 Legal name of entity Day-Lum, Inc. Day-Lum Rentals & Management, Inc. Day-Lum Properties, Inc.

Item #2 Title held President

Item #2 Term of Office 1 year

Item #2 Annual compensation E : At least \$50,000 but less than \$100,000

START Item #3 Who holds interest? Filer

Item #3 Legal name of entity Ku'ikahi Mediation Center

Item #3 Title held Director

Item #3 Term of Office 1 year

Item #3 Annual compensation

START Item #4 Who holds interest? Spouse

Item #4 Legal name of entity Hawaii Horse Owners, Inc.

Item #4 Title held President

Item #4 Term of Office 1 year

Item #4 Annual compensation

START Item #5 Who holds interest? Filer

Item #5 Legal name of entity Hawaii Community Foundation

Item #5 Title held Hawaii Island Leadership

Item #5 Term of Office 1 year

Item #5 Annual compensation

START Item #1 Who holds interest?

Item #1 Street address

Item #1 Tax Map Key

Item #1 Value

START Item #2 Who holds interest?

Item #2 Street address

Item #2 Tax Map Key

Item #2 Value

START Item #3 Who holds interest?

Item #3 Street address

Item #3 Tax Map Key

Item #3 Value

START Item #4 Who holds interest?

Item #4 Street address

Item #4 Tax Map Key

Item #4 Value

START Item #5 Who holds interest?

Item #5 Street address

Item #5 Tax Map Key

Item #5 Value

#### Category 7: Interests in Real Property Acquired, excluding Personal Residence(s) Yes, I have items

START Item #1 Who holds interest?

Item #1 Street address

Item #1 Tax Map Key

Item #1 Amount of consideration paid

Item #1 Nature of consideration paid

Item #1 Legal name of person or entity receiving the consideration

START Item #2 Who holds interest?

Item #2 Street address

Item #2 Tax Map Key

Item #2 Amount of consideration paid

Item #2 Nature of consideration paid

Item #2 Legal name of person or entity receiving the consideration

START Item #3 Who holds interest?

Item #3 Street address

Item #3 Tax Map Key

Item #3 Amount of consideration paid

Item #3 Nature of consideration paid

Item #3 Legal name of person or entity receiving the consideration

START Item #4 Who holds interest?

Item #4 Street address

Item #4 Tax Map Key

Item #4 Amount of consideration paid

Item #4 Nature of consideration paid

Item #4 Legal name of person or entity receiving the consideration

START Item #5 Who holds interest?

Item #5 Street address

Item #5 Tax Map Key

Item #5 Amount of consideration paid

Item #5 Nature of consideration paid

Item #5 Legal name of person or entity receiving the consideration

START Item #1 Who holds interest?

Item #1 Street address

Item #1 Tax Map Key

Item #1 Amount of consideration received

Item #1 Nature of consideration received

Item #1 Legal name of person or entity furnishing the consideration

START Item #2 Who holds interest?

Item #2 Street address

Item #2 Tax Map Key

Item #2 Amount of consideration received

Item #2 Nature of consideration received

Item #2 Legal name of person or entity furnishing the consideration

START Item #3 Who holds interest?

Item #3 Street address

Item #3 Tax Map Key

Item #3 Amount of consideration received

Item #3 Nature of consideration received

Item #3 Legal name of person or entity furnishing the consideration

START Item #4 Who holds interest?

Item #4 Street address

Item #4 Tax Map Key

Item #4 Amount of consideration received

Item #4 Nature of consideration received

Item #4 Legal name of person or entity furnishing the consideration

START Item #5 Who holds interest?

Item #5 Street address

Item #5 Tax Map Key

Item #5 Amount of consideration received

Item #5 Nature of consideration received

Item #5 Legal name of person or entity furnishing the consideration

#### Category 9: Clients Personally Represented before State Agencies None

START Item #1 Legal name of client

Item #1 Name of State Agency

START Item #2 Legal name of client

Item #2 Name of State Agency

START Item #3 Legal name of client

Item #3 Name of State Agency

START Item #4 Legal name of client

Item #4 Name of State Agency

START Item #5 Legal name of client

Item #5 Name of State Agency

#### Category 10: Creditor Interests in Insolvent Businesses None

START Item #1 Who holds interest?

Item #1 Legal name of entity

Item #1 Nature of business

Item #1 Nature of interest

Item #1 Value

START Item #2 Who holds interest?

Item #2 Legal name of entity

Item #2 Nature of business

Item #2 Nature of interest

Item #2 Value

START Item #3 Who holds interest?

Item #3 Legal name of entity

Item #3 Nature of business

Item #3 Nature of interest

Item #3 Value

START Item #4 Who holds interest?

Item #4 Legal name of entity

Item #4 Nature of business

Item #4 Nature of interest

Item #4 Value

START Item #5 Who holds interest?

Item #5 Legal name of entity

Item #5 Nature of business

## Item #5 Nature of interest Item #5 Value

## Upload your additional information

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. - I sign and affirm

Filer Name Nancy Suzanne Cabral

Nancy S. Cabral - Real Estate Holdings - Excluding Principal Residence - Effective July 11, 2015

Who Holds Interest	Location	TMK #	Assessed Value
Alvin Cabral	801 Manono St. – Hilo, HI 96720	3/2-2-36-24	\$168,200
Nancy & Alvin	122 E. Palai – Hilo, HI 96720	3/2-2-46-5	\$204,100
Nancy Cabral	464 Kalanikoa St. #201 – Hilo, HI 96720	3/2-2-35-26-9	\$105,300
Nancy Cabral	464 Kalanikoa St. #301 – Hilo, HI 96720	3/2-2-35-26-17	\$105,300
Nancy & Alvin	951138 Niu St. – Naalehu, HI	3/9-5-9-41	\$127,300
Alvin & Nancy	15 <sup>th</sup> Ave. HPP – Keaau, HI 96749	3/1-5-42-1	\$ 30,000
Alvin & Nancy	Waiakea-Uka – Hilo, HI 96720	3/2-4-7-195	\$165,100
Nancy Cabral	54214 WallaWalla River Rd. OR 97862		\$111,910
Nancy Cabral	52463 Sunquist Rd. OR 97862		\$117,140
Alvin/Nancy/Cody Cab	oral 39943 N Taylor St, San Tan AZ		\$268,286