HAWAII STATE ETHICS COMMISSION SHORT FORM DISCLOSURE OF FINANCIAL INTERESTS

| FILER | | | | | | | |
|--|--|---|--|--|--|--|--|
| Oh My | | oung | S | | | | |
| Last Name First | | Name | M.I. | | | | |
| FOR STATE EMPLOYEES Department | | | FOR STATE BOARD/COMMISSION MEMBERS Hawaii Public Housing Authority Board/Commission Name | | | | |
| Division | | | 07-01-2014 BEGIN Term of Office (mm/dd/yyyy) | 06-30-2018 END | | | |
| Position | | | | | | | |
| Check either number 1 or 2. If you check number 2, provide the relevant information. | | | | | | | |
| 1. I HAVE NO CHANGES TO REPORT SINCE MY LAST FILING. | | | | | | | |
| 2. I HAVE THE FOLLOWING CHANGES TO REPORT SINCE MY LAST FILING. For each addition, deletion, or other change of a financial interest: (1) Indicate who holds the interest, by checking one of the following: "Filer," if you hold the interest; "Spouse," if your spouse holds the interest; "Dependent Child," if your dependent child holds the interest; or "Jointly," if you and your spouse jointly hold the interest; (2) Check "Addition," to indicate the addition of an interest; "Deletion," to indicate the deletion of an interest; or "Change," to indicate any other change of an interest; (3) Describe the interest by following the "ITEM BY ITEM INSTRUCTIONS" in the "Short Form Disclosure Instructions." Also, provide the appropriate item number for the interest you are describing. | | | | | | | |
| Check One: ✓ Filer Spouse Dependent Child Joint | Check One: Addition ✓ Deletion Change | ITEM# <u>4</u> (Follow Honolulu Home L | w the "ITEM BY ITEM INSTRUCTIONS" in the "Short Form Disclosure Instructions.") LOANS | | | | |
| Check One: Filer Spouse Dependent Child Joint | Check One: Addition Deletion Change | ITEM #4(Follow the "ITEM BY ITEM INSTRUCTIONS" in the "Short Form Disclosure Instructions.") Central Pacific Bank Homeloans, H, H | | | | | |
| Check One: Filer ✓ Spouse Dependent Child Joint | Check One: Addition ✓ Deletion Change | ITEM # 6 (Follow the "ITEM BY ITEM INSTRUCTIONS" in the "Short Form Disclosure Instructions.") 1288 Kapiolani Blvd #1101 | | | | | |
| Check One: Filer Spouse Dependent Child Joint | Check One: Addition Deletion Change | ITEM # (Follow | the "ITEM BY ITEM INSTRUCTIONS" in the | "Short Form Disclosure Instructions.") | | | |

| Check One: Filer Spouse Dependent Child Joint | Check One: Addition Deletion Change | ITEM # | (Follow the "ITEM BY ITEM INSTRUCTIONS" in the | "Short Form Disclosure Instructions.") |
|---|-------------------------------------|---------------------------------|---|--|
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| Check One: Filer Spouse Dependent Child Joint | Check One: Addition Deletion Change | ITEM # | (Follow the "ITEM BY ITEM INSTRUCTIONS" in the | "Short Form Disclosure Instructions.") |
| FILER | | | | |
| Myoung S Oh | 04/20/2015 | | | |
| Print Name of Filer (| Date (m/d/yyyy) | | | |
| appears as the " the best of your | Filer" above a knowledge an | nd the informa d belief. You | u signify and affirm that you are t ation contained in the form is true further certify that you understar required by Hawaii law. | e, correct and complete to |