## HAWAII STATE ETHICS COMMISSION SHORT FORM DISCLOSURE OF FINANCIAL INTERESTS

FILER Aldrich		Stacey First Name		Stacey	
Last Name		First		M.I.	
FOR STATE EMPLOYEES  Education (K-12)  Department  Hawaii State Public Library S  Division  State Librarian  Position		System	Board/Commission Name  BEGIN END  Term of Office (mm/dd/yyyy)		
	-	check number 2,   REPORT SINCE MY	provide the relevant information.  LAST FILING.		
or other change hold the interest or "Jointly," if yo "Deletion," to ind interest by follow	of a financial inter ; "Spouse," if your u and your spouse licate the deletion ving the "ITEM BY	est: (1) Indicate who ho spouse holds the interest giointly hold the interest of an interest; or "Chan	ORT SINCE MY LAST FILING. For each lds the interest, by checking one of the following st; "Dependent Child," if your dependent child it; (2) Check "Addition," to indicate the addition ge," to indicate any other change of an interest in the "Short Form Disclosure Instructions." Age.	ng: "Filer," if you holds the interest; of an interest; st; (3) Describe the	
Check One: Filer Spouse Dependent Child Joint	Check One: Addition Deletion Change	ITEM # (Follow	the "ITEM BY ITEM INSTRUCTIONS" in the "Short Form Dis	sclosure Instructions.")	
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FILER				
Stacey A Aldrich	05/29/2015			
Print Name of Filer (	Date (m/d/yyyy)			
appears as the " the best of your	Filer" above a knowledge an	nd the informated 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