



FORM  
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(Rev. 5/2013)

Hawaii State Ethics Commission Received  
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# 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

Amemiya	Keith	Y.
Last Name	First Name	M.I.
Board of Education	Member	
State Agency	State Position	

## CONTACT INFORMATION

1132 Bishop Street, Suite 2450

Number and Street or P.O. Box

Honolulu	HI	96813
City	State	Zip Code
(808) 564-8191	kamemiya@islandholdings.com	
Telephone	Extension	Email Address

## GIFT INFORMATION (LIST EACH GIFT SEPARATELY)

- Donor: Education Institute of Hawaii Date Received: 10/05/2014  
Gift (Description): Airfare (HNL-LAX-LAS-YEG) Value/Cost: \$1,200
- Donor: Education Institute of Hawaii Date Received: 10/10/2014  
Gift (Description): Lodging (5 nights) Value/Cost: \$500
- Donor: Education Institute of Hawaii Date Received: 10/10/2014  
Gift (Description): Meals (6 days) Value/Cost: \$400
- Donor: \_\_\_\_\_ Date Received: \_\_\_\_\_  
Gift (Description): \_\_\_\_\_ Value/Cost: \_\_\_\_\_
- Donor: \_\_\_\_\_ Date Received: \_\_\_\_\_  
Gift (Description): \_\_\_\_\_ Value/Cost: \_\_\_\_\_

Check here if additional sheets are attached

## FILER

Keith Y. Amemiya	05/20/2015
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.