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FORM
GD1
(Rev. 5/2013)

STATE OF HAWAII
STATE ETHICS COMMISSION



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

English	J. Kalani	
Last Name	First Name	M.I.
The Senate	Senator	
State Agency	State Position	

CONTACT INFORMATION

415 S. Beretania Street, Suite 205

Number and Street or P.O. Box

Honolulu	HI	96813
City	State	Zip Code

(808) 587-7225

senenglish@capitol.hawaii.gov

Telephone	Extension	Email Address
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GIFT INFORMATION (LIST EACH GIFT SEPARATELY)

- | | |
|--|----------------------------------|
| 1. Donor: <u>McREL</u> | Date Received: <u>6/27/2014</u> |
| Gift (Description): <u>Airfare, lodging, meals</u> | Value/Cost: <u>3,059.00</u> |
| 2. Donor: <u>National Conference of State Legislators</u> | Date Received: <u>8/18/2014</u> |
| Gift (Description): <u>Travel</u> | Value/Cost: <u>1,000.00</u> |
| 3. Donor: <u>McREL</u> | Date Received: <u>10/15/2014</u> |
| Gift (Description): <u>Airfare, lodging, meals</u> | Value/Cost: <u>3,688.68</u> |
| 4. Donor: <u>National Caucus of Enviromental Legislators</u> | Date Received: <u>12/09/2014</u> |
| Gift (Description): <u>Travel</u> | Value/Cost: <u>600.00</u> |
| 5. Donor: <u>National Conference of State Legislators</u> | Date Received: <u>12/15/2014</u> |
| Gift (Description): <u>Hotel Accommodations</u> | Value/Cost: <u>717.00</u> |

Check here if additional sheets are attached

FILER

J. Kalani English	6/26/2015
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.

REC'D BY HAND DELIVERY

GIFTS DISCLOSURE STATEMENT FORM – ADDITIONAL SHEET

Name: J. Kalani English Date: 6/26/2015 Page 1 of 1

GIFT INFORMATION (LIST EACH GIFT SEPARATELY)

- Donor: State Legislative Leaders Foundation Date Received: 3/19/2015
Gift (Description): Airfare, lodging, meals Value/Cost: 1,768.03
- Donor: _____ Date Received: _____
Gift (Description): _____ Value/Cost: _____
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