



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

Sato-Sugimoto	Stacie	S
Last Name	First Name	M.I.
Hawaii State Department of Education	PTT	
State Agency	State Position	

CONTACT INFORMATION

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City

State

Zip Code

397-5800

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Telephone

Extension

Email Address

GIFT INFORMATION (LIST EACH GIFT SEPARATELY)

- | | | |
|----|---|--------------------------------------|
| 1. | Donor: <u>Hawaiian Airlines</u> | Date Received: <u>April 15, 2015</u> |
| | Gift (Description): <u>Roundtrip airfare Honolulu to Hilo, Kona to Honolulu</u> | Value/Cost: <u>141.20</u> |
| 2. | Donor: _____ | Date Received: _____ |
| | Gift (Description): _____ | Value/Cost: _____ |
| 3. | Donor: _____ | Date Received: _____ |
| | Gift (Description): _____ | Value/Cost: _____ |
| 4. | Donor: _____ | Date Received: _____ |
| | Gift (Description): _____ | Value/Cost: _____ |
| 5. | Donor: _____ | Date Received: _____ |
| | Gift (Description): _____ | Value/Cost: _____ |

Check here if additional sheets are attached

FILER

Stacie S.Sato-Sugimoto

8-18-2015

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.