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STATE OF HAWAII
STATE ETHICS COMMISSION

FORM
GD1
(Rev. 5/2013)

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

Last Name GUINTO First Name MARICEL M.I. O.

State Agency DEPT. OF EDUCATION/ State Position TEACHER
MILILANI MIDDLE SCHOOL

CONTACT INFORMATION

Number and Street or P.O. Box 95-215 HAULELAU PLACE

City MILILANI State HI Zip Code 96789

Telephone 393-3325 Extension Email Address maricel_guinto@notes.k12.hi.us

GIFT INFORMATION *(LIST EACH GIFT SEPARATELY)*

1. Donor: Hawaiian Airlines (Group Reservation) Date Received: May 11, 2015
   Gift (Description): chaperone airfare to the Big Island. Value/Cost: $171.20
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

Maricel Guinto [signature] 9/10/2015

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 email