# HAWAII STATE ETHICS COMMISSION DISCLOSURE OF FINANCIAL INTERESTS: LONG FORM

FILER	Cur	onno		Б	
Case		anne		D	
Last Name	First N	Name		M.I.	
FOR STATE EMPLOYEES		FOR STAT	TE BOARD/COMMI	ISSION MEMBERS	
Land & Natural Resources		Board of	f Land and Natu	ural Resources	
Department		Board/Commission Name			
Chair's Office		04/27/2015 12/31/2018			
Division		BEGIN END			
Chair, Dept of Land and Natural Resources		Term of Office (mm/dd/yyyy)			
Position					
FOR EACH ITEM, EXCEPT ITEM 9, DISCLO	, "DC" for deper	ndent children,	and "JT" for joint interes	its of the spouse and filer.	
List the source and amount of all income of \$1,000 or mo INCOME EARNED FROM YOUR STATE POSITION), ar	re received dur	ing the precedi	ing calendar year for ser		
F,SP, DC,JT NAME OF EMPLOYER / OTHER SOURCE(S)	NAME OF EMPLOYER / OTHER SOURCE(S) OF INCOME AMO			RED	
Check here if entry is None		$\checkmark$	Check here if additi	ional sheets are attached	
ITEM 2: OWNERSHIP	OR BENEFICI	AL INTERES	TS IN BUSINESSES		
List the amount and identity of every ownership or benefic State if the interest has a value of \$5,000 or more or is ed					
LIST ALL STOCKS, MUTUAL FUNDS OR OTHER NON-	RETIREMENT				
Please see instructions available at <a href="http://ethics.hawaii.gc">http://ethics.hawaii.gc</a>	<u>OV</u> .				
F,SP, DC,JT NAME OF BUSINESS	NATURE OF B	USINESS	NATURE OF INTEREST	VALUE OR NO.  T OF SHARES	
✓ Check here if entry is None			Check here if additi	ional sheets are attached	

ITEM 3: TRANSFER OF OWNERSHIP OR BENEFICIAL INTERESTS IN BUSINESSES List any ownership or beneficial interests in businesses transferred during the disclosure period and the date of transfer.

F,SP,					
DC,JT	OWNERSHIP OR BENEFICIAL INTEREST TRANSFERRED DURING THIS DISCLOSURE PERIOD				
✓ Che	ck here if entry is None		Check here if additiona	I sheets are attached	
		ITEM 4: CREDITORS			
List the na amount ou	me of each creditor to whom the value of \$3,0 tstanding. Exclude debts from retail installme	000 or more was owed during nt transactions for the purchas	the disclosure period and the see of consumer goods.	original amount and	
F,SP,	-		ORIGINAL AMOUNT	AMOUNT	
DC,JT	NAME OF CREDITOR		OWED	OUTSTANDING	
	als have if automic Name	Г	Charlebone if additions	 	
Check here if entry is None   ✓ Check here if additional sheets are attached					
List every	ITEM 5: OFFICER officership, directorship, trusteeship, or other	RSHIPS, DIRECTORSHIPS,	TRUSTEESHIPS	v husiness or	
organizatio	on, the term of office, and the annual compen	sation.	ing the disclosure period in an	y business of	
F,SP, DC,JT	NAME OF BUSINESS	TITLE HELD	TERM OF OFFICE	ANNUAL COMPENSATION	
DC,31	INAIVIE OF BOSINESS	I III LE IILLO	TERM OF OFFICE	COMPLINGATION	
Che	ck here if entry is None		Check here if additiona	l shoots are attached	

ITEM 6: INTERESTS IN REAL PROPERTY HELD, EXCLUDING PERSONAL RESIDENCE(S)
List interests in real property in or outside of the State held during the disclosure period, if the interest has a value of \$10,000 or more. Real

property th	at is your personal residence or the personal residence of	your spouse or dependent childre	en need not be listed.		
F,SP, DC,JT	STREET ADDRESS	TAX MAP KEY NUMBER (IF TAX KEY NUMBER EXISTS)	VALUE		
Che	ck here if entry is None		e if additional sheets are attached		
ITEM 7: INTERESTS IN REAL PROPERTY ACQUIRED, EXCLUDING PERSONAL RESIDENCE(S) List interests in real property in or outside of the State acquired during the disclosure period, if the interest has a value of \$10,000 or more. Real property that is your personal residence or the personal residence of your spouse or dependent children need not be listed.					
F,SP, DC,JT	STREET ADDRESS AND TAX MAP KEY NUMBER (IF TAX MAP KEY NUMBER EXISTS)	AMOUNT & NATURE OF CONSIDERATION PAID	NAME OF PERSON RECEIVING THE CONSIDERATION		
Che	ck here if entry is None		if additional sheets are attached		
ITEM 8: INTERESTS IN REAL PROPERTY TRANSFERRED, EXCLUDING PERSONAL RESIDENCE(S) List interests in real property in or outside of the State transferred during the disclosure period, if the interest has a value of \$10,000 or more. Real property that was your personal residence or the personal residence of your spouse or dependent children need not be listed.					
F,SP, DC,JT	STREET ADDRESS AND TAX MAP KEY NUMBER (IF TAX MAP KEY NUMBER EXISTS)	AMOUNT & NATURE OF CONSIDERATION RECEIVED	NAME OF PERSON FURNISHING THE CONSIDERATION		
Che	ck here if entry is None	/ Chack hare	if additional sheets are attached		

# ITEM 9: CLIENTS PERSONALLY REPRESENTED BEFORE STATE AGENCIES

List the names of clients personally represented by you before state agencies, except in ministerial matters, for a fee or compensation during the disclosure period, excluding clients represented before courts.

NAME OF	CLIENT	NAI	ME OF STATE AGENCY		
✓ Che	ck here if entry is None	l.	Che	ck here if additional sh	eets are attached
			RESTS IN INSOLVENT BU		
List the amount and identity of every creditor interest in insolvent businesses, held during the disclosure period, if the interest has a value of \$5,000 or more.				erest has a value of	
F,SP, DC,JT	NAME OF BUSINESS		NATURE OF BUSINESS	NATURE OF INTEREST	VALUE
20,01	TWINE OF BOOMESO		TWO TO BOOMEDO	TWO TENEDS	VALUE
✓ Che	ck here if entry is None		Che	ck here if additional sh	eets are attached
FILER					
Suzanne D. Case 05/29/2016				2016	
Type Name of Filer (First, M.I., Last)(Signature required on this line if you are filing a paper form)  Date (m/d/yyyy)					

CERTIFICATION: By checking this box or signing your name on this form, 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.

#### Check all that apply. - State Employee

- State Board/Commission Member

#### **Department** Land & Natural Resources

**Division** Chair's Office

State Employee Position Chair, Dept of Land and Natural Resources

State Board or Commission Name Board of Land and Natural Resources

Term of Office Start Apr 27, 2015

Term of Office End Dec 31, 2018

#### Category 1: Income for services rendered for preceding calendar year Yes, I have items

START Item #1 Who holds interest? Filer

Item #1 Name of Employer/ Other source of income State of Hawaii

Item #1 Compensation received F: At least \$100,000 but less than \$150,000

Item #1 Description of services rendered salary

START Item #2 Who holds interest? Spouse

Item #2 Name of Employer/ Other source of income C. Lee

Item #2 Compensation received B: At least \$1,000 but less than \$10,000

Item #2 Description of services rendered elder care

START Item #3 Who holds interest? Spouse

Item #3 Name of Employer/ Other source of income J. Magoon

Item #3 Compensation received B: At least \$1,000 but less than \$10,000

Item #3 Description of services rendered elder care

START Item #4 Who holds interest? Filer

Item #4 Name of Employer/ Other source of income

Item #4 Compensation received

Item #4 Description of services rendered

START Item #5 Who holds interest?

Item #5 Name of Employer/ Other source of income

Item #5 Compensation received

Item #5 Description of services rendered

## Category 2: Ownership or Beneficial Interests in Businesses None

# START Item #1 Who holds interest? Filer

Item #1 Legal name of business

Item #1 Nature of business

Item #1 Nature of interest

Item #1 Value of interest

Item #1 Number of Shares

START Item #2 Who holds interest?

Item #2 Legal name of business

Item #2 Nature of business

Item #2 Nature of interest

Item #2 Value of interest

Item #2 Number of Shares

START Item #3 Who holds interest?

Item #3 Legal name of business

Item #3 Nature of business

Item #3 Nature of interest

Item #3 Value of interest

Item #3 Number of Shares

START Item #4 Who holds interest?

Item #4 Legal name of business

Item #4 Nature of business

Item #4 Nature of interest

Item #4 Value of interest

Item #4 Number of Shares

START Item #5 Who holds interest?

Item #5 Legal name of business

Item #5 Nature of business

Item #5 Nature of interest

Item #5 Value of interest

Item #5 Number of Shares

START Item #1 Who holds interest?

Item #1 Ownership or beneficial interest transferred during this disclosure period

Item #1 Date of transfer

START Item #2 Who holds interest?

Item #2 Ownership or beneficial interest transferred during this disclosure period

Item #2 Date of transfer

START Item #3 Who holds interest?

Item #3 Ownership or beneficial interest transferred during this disclosure period

Item #3 Date of transfer

START Item #4 Who holds interest?

Item #4 Ownership or beneficial interest transferred during this disclosure period

Item #4 Date of transfer

START Item #5 Who holds interest?

Item #5 Ownership or beneficial interest transferred during this disclosure period

Item #5 Date of transfer

#### Category 4: Creditors Yes, I have items

START Item #1 Who holds interest? Joint

Item #1 Legal name of creditor Central Pacific Bank

Item #1 Original amount owed I : At least \$500,000 but less than \$750,000

Item #1 Amount outstanding I: At least \$500,000 but less than \$750,000

START Item #2 Who holds interest? Filer

Item #2 Legal name of creditor Bank of Hawaii

Item #2 Original amount owed E: At least \$50,000 but less than \$100,000

Item #2 Amount outstanding E : At least \$50,000 but less than \$100,000

START Item #3 Who holds interest?

Item #3 Legal name of creditor

Item #3 Original amount owed

Item #3 Amount outstanding

START Item #4 Who holds interest?

Item #4 Legal name of creditor

Item #4 Original amount owed

Item #4 Amount outstanding

START Item #5 Who holds interest?

Item #5 Legal name of creditor

Item #5 Original amount owed

Item #5 Amount outstanding

## Category 5: Officerships, Directorships, Trusteeships None

START Item #1 Who holds interest?

Item #1 Legal name of entity

Item #1 Title held

Item #1 Term of Office

Item #1 Annual compensation

START Item #2 Who holds interest?

Item #2 Legal name of entity

Item #2 Title held

Item #2 Term of Office

Item #2 Annual compensation

START Item #3 Who holds interest?

Item #3 Legal name of entity

Item #3 Title held

Item #3 Term of Office

Item #3 Annual compensation

START Item #4 Who holds interest?

Item #4 Legal name of entity

Item #4 Title held

Item #4 Term of Office

Item #4 Annual compensation

START Item #5 Who holds interest?

Item #5 Legal name of entity

Item #5 Title held

Item #5 Term of Office

Item #5 Annual compensation

#### START Item #1 Who holds interest? Filer

Item #1 Street address 19-4075 Kalanihonua Loop (50%)

Volcano, Hawaii 96785

**United States** 

Item #1 Tax Map Key 1-9-009-124-0000

Item #1 Value F: At least \$100,000 but less than \$150,000

START Item #2 Who holds interest?

Item #2 Street address 19-4075 Kalanihonua Loop (50%)

Volcano, Hawaii 96785

**United States** 

Item #2 Tax Map Key 1-9-009-125-0000

Item #2 Value C : At least \$10,000 but less than \$25,000

START Item #3 Who holds interest? Filer

Item #3 Street address 19-4075 Kalanihonua Loop (50%)

Volcano, Hawaii 96785

**United States** 

Item #3 Tax Map Key 1-9-009-128-0000

Item #3 Value C: At least \$10,000 but less than \$25,000

START Item #4 Who holds interest?

Item #4 Street address

Item #4 Tax Map Key

Item #4 Value

START Item #5 Who holds interest?

Item #5 Street address

Item #5 Tax Map Key

Item #5 Value

# Category 7: Interests in Real Property Acquired, excluding Personal Residence(s) Yes, I have items

#### START Item #1 Who holds interest? Filer

Item #1 Street address 16 Alford Road (42%)

Alford, MA 01230

**United States** 

Item #1 Tax Map Key

Item #1 Amount of consideration paid F: At least \$100,000 but less than \$150,000

Item #1 Nature of consideration paid Roth IRA funds

Item #1 Legal name of person or entity receiving the consideration Peter J. Case, Jr., personal representative, Estate of Barbara Vandeusen

START Item #2 Who holds interest?

Item #2 Street address

Item #2 Tax Map Key

Item #2 Amount of consideration paid

Item #2 Nature of consideration paid

Item #2 Legal name of person or entity receiving the consideration

START Item #3 Who holds interest?

Item #3 Street address

Item #3 Tax Map Key

Item #3 Amount of consideration paid

Item #3 Nature of consideration paid

Item #3 Legal name of person or entity receiving the consideration

START Item #4 Who holds interest?

Item #4 Street address

Item #4 Tax Map Key

Item #4 Amount of consideration paid

Item #4 Nature of consideration paid

Item #4 Legal name of person or entity receiving the consideration

START Item #5 Who holds interest?

Item #5 Street address

Item #5 Tax Map Key

Item #5 Amount of consideration paid

Item #5 Nature of consideration paid

Item #5 Legal name of person or entity receiving the consideration

## START Item #1 Who holds interest? Spouse

Item #1 Street address 6843 Birdsey Rd

Helena, Montana United States

Item #1 Tax Map Key

Item #1 Amount of consideration received B: At least \$1,000 but less than \$10,000

Item #1 Nature of consideration received Contract for sale

Item #1 Legal name of person or entity furnishing the consideration B. Franks Ongoy

START Item #2 Who holds interest?

Item #2 Street address

Item #2 Tax Map Key

Item #2 Amount of consideration received

Item #2 Nature of consideration received

Item #2 Legal name of person or entity furnishing the consideration

START Item #3 Who holds interest?

Item #3 Street address

Item #3 Tax Map Key

Item #3 Amount of consideration received

Item #3 Nature of consideration received

Item #3 Legal name of person or entity furnishing the consideration

START Item #4 Who holds interest?

Item #4 Street address

Item #4 Tax Map Key

Item #4 Amount of consideration received

Item #4 Nature of consideration received

Item #4 Legal name of person or entity furnishing the consideration

START Item #5 Who holds interest?

Item #5 Street address

Item #5 Tax Map Key

Item #5 Amount of consideration received

Item #5 Nature of consideration received

Item #5 Legal name of person or entity furnishing the consideration

#### Category 9: Clients Personally Represented before State Agencies None

START Item #1 Legal name of client

Item #1 Name of State Agency

START Item #2 Legal name of client

Item #2 Name of State Agency

START Item #3 Legal name of client

Item #3 Name of State Agency START Item #4 Legal name of client

Item #4 Name of State Agency

START Item #5 Legal name of client

Item #5 Name of State Agency

# Category 10: Creditor Interests in Insolvent Businesses None

START Item #1 Who holds interest?

Item #1 Legal name of entity

Item #1 Nature of business

Item #1 Nature of interest

Item #1 Value

START Item #2 Who holds interest?

Item #2 Legal name of entity

Item #2 Nature of business

Item #2 Nature of interest

Item #2 Value

START Item #3 Who holds interest?

Item #3 Legal name of entity

Item #3 Nature of business

Item #3 Nature of interest

Item #3 Value

START Item #4 Who holds interest?

Item #4 Legal name of entity

Item #4 Nature of business

Item #4 Nature of interest

Item #4 Value

START Item #5 Who holds interest?

Item #5 Legal name of entity Item #5 Nature of business Item #5 Nature of interest Item #5 Value

# Upload your additional information

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. - I sign and affirm

Filer Name Suzanne D. Case