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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

Last Name Matsumura First Name Kent M.I. R.

State Agency Department of Education State Position Principal

CONTACT INFORMATION

Number and Street or P.O. Box Honowai Elementary School
94-600 Honowai St.

City Waipahu State Hawaii Zip Code 96797

Telephone 686-7100 Extension Email Address kent_matsumura@notes.k12.hi.us

GIFT INFORMATION *(LIST EACH GIFT SEPARATELY)*

1. Donor: Houghton Mifflin Harcourt Date Received: 02/22/2016
   Gift (Description): Conference, Airfare, Lodging Value/Cost: est. $1,500.00
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:

[X] **Check here if additional sheets are attached**

FILER Kent R. Matsumura

Kent R. Matsumura 02/24/2016
Print Name of Filer *(First M.I. Last)* Date *(m/d/yyyy)*

[X] **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.

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