



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

Nagamine

Jill

T.

Last Name

First Name

M.I.

Department of the Attorney General

Deputy Attorney General

State Agency

State Position

CONTACT INFORMATION

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Telephone

Extension

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GIFT INFORMATION (LIST EACH GIFT SEPARATELY)

1. Donor: Hawaii State Bar Association Date Received: 10/23/15
 Gift (Description): HSBA conference, lunch, parking Value/Cost: \$240.00
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: _____

Check here if additional sheets are attached

FILER

Jill T. Nagamine

6/13/16

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.