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FORM
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(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

Mizuno

Last Name

John

First Name

M

M.I.

Legislature

State Agency

State Representative

State Position

CONTACT INFORMATION

Hawaii State Capitol

415 South Beretania Street, Room 439

Number and Street or P.O. Box

Honolulu

City

HI

State

96813

Zip Code

(808) 586-6050

Telephone

Extension

repmizuno@capitol.hawaii.gov

Email Address

GIFT INFORMATION (LIST EACH GIFT SEPARATELY)

- | | | |
|----|---|---|
| 1. | Donor: <u>Nat'l Conf. of State Legislatures (NCSL)</u> | Date Received: <u>6/10/15 - 6/12/15</u> |
| | Gift (Description): <u>Accomodation for Symposium - DCA</u> | Value/Cost: <u>\$1,263.33</u> |
| 2. | Donor: <u>NCSL Quad Caucus - DCA</u> | Date Received: <u>6/13/15 - 6/16/15</u> |
| | Gift (Description): <u>Airfare and Accomodation</u> | Value/Cost: <u>\$1,689.94</u> |
| 3. | Donor: <u>Assn. of Pacific Island Legislature (APIL)</u> | Date Received: <u>7/7/15 - 7/11/15</u> |
| | Gift (Description): <u>Half of Airfare and Accomodation</u> | Value/Cost: <u>\$1,046.50</u> |
| 4. | Donor: <u>CSG -Toll Fellowship Program -</u> | Date Received: <u>8/28/15 - 9/2/15</u> |
| | Gift (Description): <u>Accomodation - Lexington</u> | Value/Cost: <u>\$550.08</u> |
| 5. | Donor: <u>CSG - Toll Fellowship Graduation</u> | Date Received: <u>12/10/15 - 12/13/15</u> |
| | Gift (Description): <u>Accomodation - Nashville</u> | Value/Cost: <u>\$440.65</u> |

Check here if additional sheets are attached

FILER

John M. Mizuno

Print Name of Filer (First M.I. Last)

6/30/2016

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.

GIFTS DISCLOSURE STATEMENT FORM – ADDITIONAL SHEET

Name: John M. Mizuno Date: 6/30/2016 Page 2 of 2

GIFT INFORMATION (LIST EACH GIFT SEPARATELY)

- Donor: CSG - Cybersecurity & Privacy Police Academy Date Received: 5/23/16 - 5/26/16
Gift (Description): Airfare and Accomodation - Seattle Washington Value/Cost: 1,357.13
- Donor: _____ Date Received: _____
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