## HAWAII STATE ETHICS COMMISSION SHORT FORM DISCLOSURE OF FINANCIAL INTERESTS

FILER					
Cox		Hel		Helen	
Last Name Firs		First	Name	M.I.	
FOR STATE EMPLOYEES			FOR STATE BOARD/COMMISSION MEM	IBERS	
University of Hawaii					
Department			Board/Commission Name		
Kauai Community College			DEOIN END		
Division			BEGIN END Term of Office (mm/dd/yyyy)		
Chancellor					
Position					
Check either numbe	r 1 or 2. If you	check number 2, p	provide the relevant information.		
1. I HAVE NO C	HANGES TO F	REPORT SINCE MY	LAST FILING.		
or other change hold the interest; or "Jointly," if you "Deletion," to ind interest by follow	of a financial inter "Spouse," if your a and your spouse icate the deletion ing the "ITEM BY	est: (1) Indicate who ho spouse holds the interest of an interest; or "Chang	DRT SINCE MY LAST FILING. For each addit lds the interest, by checking one of the following: "Fil st; "Dependent Child," if your dependent child holds; (2) Check "Addition," to indicate the addition of an inge," to indicate any other change of an interest; (3) D in the "Short Form Disclosure Instructions." Also, page.	er," if you the interest; nterest; Describe the	
Check One:  ✓ Filer  Spouse  Dependent Child  Joint	Check One: Addition Deletion Change	Remove Chambe Add Hawaii Coun	5 (Follow the "ITEM BY ITEM INSTRUCTIONS" in the "Short Form Disclosure Instructions.") ve Chamber of Commerce awaii Council for the Humanities board member 2016 -2019. all compensation \$0		
Check One: Filer Spouse Dependent Child Joint	Check One: Addition Deletion Change	ITEM # (Follow	w the "ITEM BY ITEM INSTRUCTIONS" in the "Short Form Disclosure Instructions.")		
Check One: Filer Spouse Dependent Child Joint	Check One: Addition Deletion Change	ITEM # (Follow	the "ITEM BY ITEM INSTRUCTIONS" in the "Short Form Disclosure Instructions.")		
Check One: Filer Spouse Dependent Child Joint	Check One: Addition Deletion Change	ITEM # (Follow	the "ITEM BY ITEM INSTRUCTIONS" in the "Short Form Disclosure I	nstructions.")	

Check One: Filer Spouse Dependent Child Joint	Check One: Addition Deletion Change	ITEM #	(Follow the "ITEM BY ITEM INSTRUCTIONS" in the	"Short Form Disclosure Instructions.")
Check One: Filer Spouse Dependent Child Joint	Check One: Addition Deletion Change	ITEM #	(Follow the "ITEM BY ITEM INSTRUCTIONS" in the	"Short Form Disclosure Instructions.")
Check One: Filer Spouse Dependent Child Joint	Check One: Addition Deletion Change	ITEM # (Follow the "ITEM BY ITEM INSTRUCTIONS" in the "Short Form Disclosure Instructions.")		
Check One: Filer Spouse Dependent Child Joint	Check One: Addition Deletion Change	ITEM #	(Follow the "ITEM BY ITEM INSTRUCTIONS" in the	"Short Form Disclosure Instructions.")
Check One: Filer Spouse Dependent Child Joint	Check One: Addition Deletion Change	ITEM #	(Follow the "ITEM BY ITEM INSTRUCTIONS" in the	"Short Form Disclosure Instructions.")
Check One: Filer Spouse Dependent Child Joint	Check One: Addition Deletion Change	ITEM #	(Follow the "ITEM BY ITEM INSTRUCTIONS" in the	"Short Form Disclosure Instructions.")
FILER				
Helen Amelia Co	05/08/2017			
Print Name of Filer (	Date (m/d/yyyy)			
appears as the " the best of your	Filer" above a knowledge an	nd the informated belief. You	u signify and affirm that you are t ation contained in the form is true further certify that you understar required by Hawaii law.	e, correct and complete to