HAWAII STATE ETHICS COMMISSION SHORT FORM DISCLOSURE OF FINANCIAL INTERESTS

FILER						
Salaveria		Luis	8	Luis		
Last Name First		Name	M.I.			
FOR STATE EMPLOYEES			FOR STATE BOARD/COMMISSION MEMBERS			
Business, Economic Development & Touris						
Department			Board/Commission Name			
Director's Office						
Division			BEGIN END			
Director			Term of Office (mm/dd/yyyy)			
Position						
	-	· ·	provide the relevant information.			
1. 1 I HAVE NO CHANGES TO 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 interes jointly hold the interest of an interest; or "Chan	ORT SINCE MY LAST FILING. For each addition lds the interest, by checking one of the following: "File st; "Dependent Child," if your dependent child holds the propertiest; (2) Check "Addition," to indicate the addition of an intege," to indicate any other change of an interest; (3) De in the "Short Form Disclosure Instructions." Also, prog.	r," if you ne interest; terest; escribe the		
Check One: Filer Spouse Dependent Child Joint	Check One: Addition Deletion Change	ITEM # (Follow	the "ITEM BY ITEM INSTRUCTIONS" in the "Short Form Disclosure Ins	structions.")		
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FILER				
Luis Penilla Sala	05/30/2017			
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