HAWAII STATE ETHICS COMMISSION SHORT FORM DISCLOSURE OF FINANCIAL INTERESTS

FILER				
Hokoana Lui			Lui	
Last Name First		Name	M.I.	
FOR STATE EMPLOYEES University of Hawaii Department			FOR STATE BOARD/COMMISSION MEMBERS Board/Commission Name	
Maui College Division Chancellor Position			BEGIN END Term of Office (mm/dd/yyyy)	
	-	check number 2, p	provide the relevant information. 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 ring the "ITEM BY	est: (1) Indicate who ho spouse holds the interest jointly hold the interest of an interest; or "Chan	ORT SINCE MY LAST FILING. For each addids the interest, by checking one of the following: "Fest; "Dependent Child," if your dependent child holds; (2) Check "Addition," to indicate the addition of an ge," to indicate any other change of an interest; (3) I in the "Short Form Disclosure Instructions." Also, p. g.	iler," if you s the interest; interest; Describe 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	Instructions.")
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FILER				
Lui Kealii Hokoa	05/31/2017			
Print Name of Filer (Date (m/d/yyyy)			
appears as the "	Filer" above a knowledge an	nd the informa d 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