



**FORM
GD1**
(Rev. 5/2013)

Hawaii State Ethics Commission Received
6/19/2017 9:28:01 AM



**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

| | | |
|--------------------------|-----------------------------|------|
| Woodson | Justin | H |
| Last Name | First Name | M.I. |
| Hawaii State Legislature | 9th District Representative | |
| State Agency | State Position | |

CONTACT INFORMATION

Hawaii State Capitol
415 S Beretania Street Room 405
Number and Street or P.O. Box

| | | |
|----------------|-------------------------------|---------------|
| Honolulu | HI | 96817 |
| City | State | Zip Code |
| (808) 586-6210 | repwoodson@capitol.hawaii.gov | |
| Telephone | Extension | Email Address |

GIFT INFORMATION (LIST EACH GIFT SEPARATELY)

1. Donor: County of Maui Date Received: June 2016
Gift (Description): Air, hotel, ground transportation (NYC) Value/Cost: 1834.34
2. Donor: Maui Visitors Bureau Date Received: July 2016
Gift (Description): Air and per diem (NYC) Value/Cost: 734.89
3. Donor: Excel in Education Foundation Date Received: December 2016
Gift (Description): Air, hotel, meals, ground transportation (DC) Value/Cost: 1584.68
4. Donor: University of Hawaii (VP for Research) Date Received: January 2017
Gift (Description): Air, hotel, per diem (Huntsville and DC) Value/Cost: 3000.37
5. Donor: Taipei Economic and Cultural Office Date Received: May 2017
Gift (Description): Air, hotel, meals, ground transportation (Taiwan) Value/Cost: 5750.00

Check here if additional sheets are attached

FILER

| | |
|---------------------------------------|-----------------|
| Justin H. Woodson | 6/19/2017 |
| 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.

GIFTS DISCLOSURE STATEMENT FORM – ADDITIONAL SHEET

Name: Justin H. Woodson Date: 6/19/2017 Page 2 of 2

GIFT INFORMATION (LIST EACH GIFT SEPARATELY)

- Donor: The Education Trust Date Received: May 2017
Gift (Description): Air and hotel (Denver) Value/Cost: 1242.80
- Donor: _____ Date Received: _____
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