

HAWAII STATE ETHICS COMMISSION SHORT FORM DISCLOSURE OF FINANCIAL INTERESTS

FILER		
Chun	Grant	YM
Last Name	First Name	M.I.

FOR STATE EMPLOYEES Department Division Position	FOR STATE BOARD/COMMISSION MEMBERS Board of Education Board/Commission Name 1/21/2014 6/30/2017 BEGIN END <i>Term of Office (mm/dd/yyyy)</i>
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Check either number 1 or 2. If you check number 2, provide the relevant information.

1. **I HAVE NO CHANGES TO REPORT SINCE MY LAST FILING.**
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2. **I HAVE THE FOLLOWING CHANGES TO REPORT SINCE MY LAST FILING.** For each addition, deletion, or other change of a financial interest: (1) Indicate who holds the interest, by checking one of the following: "Filer," if you hold the interest; "Spouse," if your spouse holds the interest; "Dependent Child," if your dependent child holds the interest; or "Jointly," if you and your spouse jointly hold the interest; (2) Check "Addition," to indicate the addition of an interest; "Deletion," to indicate the deletion of an interest; or "Change," to indicate any other change of an interest; (3) Describe the interest by following the "ITEM BY ITEM INSTRUCTIONS" in the "Short Form Disclosure Instructions." Also, provide the appropriate item number for the interest you are describing.

Check One: <input type="checkbox"/> Filer <input checked="" type="checkbox"/> Spouse <input type="checkbox"/> Dependent Child <input type="checkbox"/> Joint	Check One: <input checked="" type="checkbox"/> Addition <input type="checkbox"/> Deletion <input type="checkbox"/> Change	ITEM # <u>1</u> (Follow the "ITEM BY ITEM INSTRUCTIONS" in the "Short Form Disclosure Instructions.") State of Hawaii, Department of Education H. P. Baldwin High School 1650 Kaahumanu Avenue Wailuku, HI 96793 "E"; School Registrar
Check One: <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Child <input type="checkbox"/> Joint	Check One: <input type="checkbox"/> Addition <input type="checkbox"/> Deletion <input checked="" type="checkbox"/> Change	ITEM # <u>2</u> (Follow the "ITEM BY ITEM INSTRUCTIONS" in the "Short Form Disclosure Instructions.") Entry should now be 3,400 shares.
Check One: <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Child <input type="checkbox"/> Joint	Check One: <input type="checkbox"/> Addition <input checked="" type="checkbox"/> Deletion <input type="checkbox"/> Change	ITEM # <u>4</u> (Follow the "ITEM BY ITEM INSTRUCTIONS" in the "Short Form Disclosure Instructions.") Entry should now be "NONE."
Check One: <input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Child <input type="checkbox"/> Joint	Check One: <input type="checkbox"/> Addition <input type="checkbox"/> Deletion <input checked="" type="checkbox"/> Change	ITEM # <u>5</u> (Follow the "ITEM BY ITEM INSTRUCTIONS" in the "Short Form Disclosure Instructions.") Terms of office for these boards should now be "January-December 2016."

<u>Check One:</u> <input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Child <input type="checkbox"/> Joint	<u>Check One:</u> <input type="checkbox"/> Addition <input type="checkbox"/> Deletion <input type="checkbox"/> Change	ITEM # _____ (Follow the "ITEM BY ITEM INSTRUCTIONS" in the "Short Form Disclosure Instructions.")
<u>Check One:</u> <input type="checkbox"/> Filer <input type="checkbox"/> Spouse <input type="checkbox"/> Dependent Child <input type="checkbox"/> Joint	<u>Check One:</u> <input type="checkbox"/> Addition <input type="checkbox"/> Deletion <input type="checkbox"/> Change	ITEM # _____ (Follow the "ITEM BY ITEM INSTRUCTIONS" in the "Short Form Disclosure Instructions.")
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FILER

Grant Y.M. Chun

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

4/24/2015

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.