

1	DONOR	2	3	4	5	
		DESCRIPTION OF GIFT		DATE REC'D	GIFT VALUE	AGG. VALUE

___ Check here if you have attached additional sheets.

CERTIFICATION: I hereby certify that the above is a true, correct, and complete statement.

Charlene E. Ono

5-5-2006

SIGNATURE

DATE

STATE OF HAWAII
STATE ETHICS COMMISSION

06 MAY -8 AM 11:35