



HAWAII STATE ETHICS COMMISSION

1001 Bishop Street, ASB Tower Suite 970
Honolulu, Hawaii 96813
P.O. Box 616, Honolulu, Hawaii 96809
Telephone: 587-0460 Fax: 587-0470
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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 on June 30)

NAME: Joseph Evanoff

STATE POSITION: Director of Contracts & Materials

STATE AGENCY: Hawaii Health Systems Corp.

STATE TEL. NO.: 808-884-5722

STATE MAILING ADDRESS: Kohala Hospital
PO box 10
Kapaau, HI 96755

1	DONOR	2	DESCRIPTION OF GIFT	3	DATE REC'D	4	GIFT VALUE	5	AGG. VALUE
	MedAssets Contract		Training Conf. & Business Summit: Airfare & Hotel, plus estimated conference meals supplied		3/24/08 thru 3/28/08		\$786.46 \$660.54 + \$200		\$1647.00

1	DONOR	2	3	4	5
		DESCRIPTION OF GIFT	DATE REC'D	GIFT VALUE	AGG. VALUE
		'08 JUN -5 MD-56			
		STATE ETHICS COMMISSION			

Check here if you have attached additional sheets.

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

[Handwritten Signature]

 SIGNATURE

6/3/08

 DATE