



**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  
email: ethics@hawaiiethics.org

**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: Patrick Saka STATE POSITION: Regional Chief Operating Officer

STATE AGENCY: Hawaii Health Systems Corporation - Maui Region STATE TEL. NO.: 808-244-9056

STATE MAILING ADDRESS: 221 Mahalani Street  
Wailuku, HI 96793

| 1 | DONOR | 2 | DESCRIPTION OF GIFT | 3 | DATE REC'D | 4 | GIFT VALUE | 5 | AGG. VALUE |
|---|-------|---|---------------------|---|------------|---|------------|---|------------|
|   |       |   | ** NONE **          |   |            |   |            |   |            |
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