



HAWAII STATE ETHICS COMMISSION

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Honolulu, Hawaii 96813
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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: **TOM BROWER** STATE POSITION: **REPRESENTATIVE**

STATE AGENCY: **LEGISLATURE** STATE TEL. NO.: **586-8520**

STATE MAILING ADDRESS:
STATE CAPITOL, #310 HONOLULU, HAWAII 96813

1	DONOR	2	DESCRIPTION OF GIFT	3	DATE REC'D	4	GIFT VALUE	5	AGG. VALUE
		NO GIFTS TO REPORT			\emptyset		\emptyset		\emptyset

