

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines.

12FE4M5

Stanley Chang for Congress

ADDRESS (number and street) 637 Ulumaika Street

Check if different than previously reported. (ACC)

Honolulu

HI

96816

2. **FEC IDENTIFICATION NUMBER** ▼

C C00540468

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

HI

01

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on / / in the State of

(c) 30-Day **POST**-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period

/ / through / /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Nathan Okubo

Signature of Treasurer Nathan Okubo

[Electronically Filed]

Date

/ /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

| | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|
| Office Use Only | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Stanley Chang for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2013 To: M M / D D / Y Y Y Y 12 / 31 / 2013

| | COLUMN A This Period | COLUMN B Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e)).... | 126238.95 | 435426.75 |
| (b) Total Contribution Refunds (from Line 20(d)) | 2000.00 | 3100.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))..... | 124238.95 | 432326.75 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 71721.14 | 106892.14 |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | 22.99 | 22.99 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))..... | 71698.15 | 106869.15 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 325457.60 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0.00 | |

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Stanley Chang for Congress

Report Covering the Period: From: / / To: / /

| I. RECEIPTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|---|-------------------------------|------------------------------------|
| 11. CONTRIBUTIONS (other than loans) FROM: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 114845.83 | 406442.62 |
| (ii) Unitemized..... | 10393.12 | 22534.13 |
| (iii) TOTAL of contributions from individuals ▶ | 125238.95 | 428976.75 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 1000.00 | 6450.00 |
| (d) The Candidate..... | 0.00 | 0.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)).. | 126238.95 | 435426.75 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) All Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))..... | 0.00 | 0.00 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | 22.99 | 22.99 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶ | 126261.94 | 435449.74 |

DETAILED SUMMARY PAGE
of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 71721.14 | 106892.14 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) Of All Other Loans | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 0.00 | 0.00 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | 2000.00 | 3100.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... | 2000.00 | 3100.00 |
| 21. OTHER DISBURSEMENTS | 0.00 | 0.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶ | 73721.14 | 109992.14 |

III. CASH SUMMARY

| | |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 272916.80 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 126261.94 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 399178.74 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 73721.14 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 325457.60 |

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 5 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Terrance Arashiro

Mailing Address 641 10th Ave.

City Honolulu State HI Zip Code 96816

FEC ID number of contributing federal political committee. **C**

Name of Employer Austin, Tsutsumi & Associates Occupation Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 18 / 2013

Transaction ID : SA11AI.5432

Amount of Each Receipt this Period
 2000.00

B. Full Name (Last, First, Middle Initial)
Jeffrey Au

Mailing Address 1330 Ala Moana Blvd. #1503

City Honolulu State HI Zip Code 96814

FEC ID number of contributing federal political committee. **C**

Name of Employer PacifiCap Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 12 / 2013

Transaction ID : SA11AI.5531

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Sidney Ayabe

Mailing Address 1745 Nalulu Pl.

City Honolulu State HI Zip Code 96821

FEC ID number of contributing federal political committee. **C**

Name of Employer Ayabe Chong Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 18 / 2013

Transaction ID : SA11AI.5455

Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 6 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Joshua Bedell

Mailing Address 88 Leonard Street
#608

City State Zip Code
New York NY 10013

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Goldman, Sachs & Co. Investment Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 29 / 2013

Transaction ID : SA11AI.5572

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Trevor Benn

Mailing Address 2825 Park Street

City State Zip Code
Honolulu HI 96817

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-employed Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 24 / 2013

Transaction ID : SA11AI.5612

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Jeffrey Berenberg

Mailing Address 46-143 Nahiku Place

City State Zip Code
Kaneohe HI 96744

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
U.S. Army Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 28 / 2013

Transaction ID : SA11AI.5577

Amount of Each Receipt this Period
750.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Alisha Bhagat

Mailing Address 156 Prince St.
#2A

City State Zip Code
New York NY 10012

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Forum for the Future Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2013

Transaction ID : SA11AI.5652

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Michael Blumenthal

Mailing Address 110 Pacific Ave.
Suite 350

City State Zip Code
San Francisco CA 94112

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MB Property Acquisitions Real Estate Developer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2013

Transaction ID : SA11AI.5628

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mark D. Bratton

Mailing Address 3003 Kalakaua Ave.
4B

City State Zip Code
Honolulu HI 96815

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Bratton Realty Advisers Real Estate Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2013

Transaction ID : SA11AI.5291

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3100.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Margery Bronster

Mailing Address 1935 Paula Dr.

City Honolulu State HI Zip Code 96816

FEC ID number of contributing federal political committee. **C**

Name of Employer Bronster Hoshibata Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.5528

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Timothy Cahill

Mailing Address 492 Massachusetts Avenue
Apt. 31

City Boston State MA Zip Code 02118

FEC ID number of contributing federal political committee. **C**

Name of Employer Ropes & Gray LLP Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 14 / 2013

Transaction ID : SA11AI.5218

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Stanford Carr

Mailing Address 1100 Alakea St.
27th Floor

City Honolulu State HI Zip Code 96813

FEC ID number of contributing federal political committee. **C**

Name of Employer Stanford Carr Development, LLC Occupation Real Estate Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2013

Transaction ID : SA11AI.5666

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Bao K. Chen

Mailing Address 637 Ulumaika St.

City Honolulu State HI Zip Code 96816

FEC ID number of contributing federal political committee. **C**

Name of Employer Waikiki Shopping Plaza Occupation Utility Maintenance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.5494

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Calvert G Chipchase IV

Mailing Address 2020 Kamehameha Avenue

City Honolulu State HI Zip Code 96822

FEC ID number of contributing federal political committee. **C**

Name of Employer Cades Schutte LLP Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 19 / 2013

Transaction ID : SA11AI.5361

Amount of Each Receipt this Period
 200.00

C. Full Name (Last, First, Middle Initial)
Yahn Rung Chu

Mailing Address 350 W. 42nd St.
Apt. 25E

City New York State NY Zip Code 10036

FEC ID number of contributing federal political committee. **C**

Name of Employer White & Case LLP Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2013

Transaction ID : SA11AI.5276

Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1700.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 10 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Lowell K.W. Chun

Mailing Address 1296 Kapiolani Blvd.
#1907

City Honolulu State HI Zip Code 96814

FEC ID number of contributing federal political committee. **C**

Name of Employer iProperties Hawaii Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 10 / 2013

Transaction ID : SA11AI.5199

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Adam Cohn

Mailing Address 1221 Stone Canyon Road

City Los Angeles State CA Zip Code 90077

FEC ID number of contributing federal political committee. **C**

Name of Employer Knowledge Universe Occupation Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 14 / 2013

Transaction ID : SA11AI.5402

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
Catherine Conrad

Mailing Address 2955 Makalei Place

City Honolulu State HI Zip Code 96815

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation None

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.5496

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3100.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 11 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Robert M. Creps

Mailing Address 1414 Mokulua Dr.

City State Zip Code
Kailua HI 96734

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Grace Pacific Corporation Senior Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 18 / 2013

Transaction ID : SA11AI.5441

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Johann Cutiongco

Mailing Address 308 W 73rd St.
Apt. A

City State Zip Code
New York NY 10023

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Kinnek Systems Engineer and Data Scientist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 11 / 2013

Transaction ID : SA11AI.5226

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Johann Cutiongco

Mailing Address 308 W 73rd St.
Apt. A

City State Zip Code
New York NY 10023

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Kinnek Systems Engineer and Data Scientist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
900.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 30 / 2013

Transaction ID : SA11AI.5660

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1400.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 12 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Bharat Das

Mailing Address 975 Memorial Driv
Unit 807

City Cambridge State MA Zip Code 02138

FEC ID number of contributing federal political committee. **C**

Name of Employer Harvard University Occupation Finance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 16 / 2013

Transaction ID : SA11AI.5257

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Bharat Das

Mailing Address 975 Memorial Driv
Unit 807

City Cambridge State MA Zip Code 02138

FEC ID number of contributing federal political committee. **C**

Name of Employer Harvard University Occupation Finance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.5633

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Bill Deuchar

Mailing Address 1777 Ala Moana Blvd.
Suite 200

City Honolulu State HI Zip Code 96815

FEC ID number of contributing federal political committee. **C**

Name of Employer US Pacific Development Occupation Developer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2013

Transaction ID : SA11AI.5378

Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 13 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

| | | |
|---|------------------------|--|
| Full Name (Last, First, Middle Initial) W. Allen Doane | | Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2013 |
| Mailing Address P.O. Box 3440 | | Transaction ID : SA11AI.5530 |
| City Honolulu | State HI | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Alexander & Baldwin | Occupation Director | Election Cycle-to-Date 2000.00 |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |

| | | |
|---|----------------------------|--|
| Full Name (Last, First, Middle Initial) Walter Dods Jr. | | Date of Receipt M M / D D / Y Y Y Y 12 / 18 / 2013 |
| Mailing Address 214 Wailupe Circle | | Transaction ID : SA11AI.5450 |
| City Honolulu | State HI | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Chairman | Occupation Matson, Inc. | Election Cycle-to-Date 2000.00 |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |

| | | |
|---|--------------------------|--|
| Full Name (Last, First, Middle Initial) Michael Doyle | | Date of Receipt M M / D D / Y Y Y Y 12 / 30 / 2013 |
| Mailing Address 125 Kaapuni Drive | | Transaction ID : SA11AI.5663 |
| City Kailua | State HI | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Group Pacific (Hawaii), Inc. | Occupation Consultant | Election Cycle-to-Date 500.00 |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 2500.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 14 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Paul Egerman

Mailing Address **77 Westcliff Rd**

City **Weston** State **MA** Zip Code **02493**

FEC ID number of contributing federal political committee. **C**

Name of Employer **N/A** Occupation **None**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 20 / 2013

Transaction ID : SA11AI.5232

Amount of Each Receipt this Period
 2000.00

B. Full Name (Last, First, Middle Initial)
Dana Federman

Mailing Address **536 Dalehurst Ave.**

City **Los Angeles** State **CA** Zip Code **90024**

FEC ID number of contributing federal political committee. **C**

Name of Employer **N/A** Occupation **None**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 01 / 2013

Transaction ID : SA11AI.5182

Amount of Each Receipt this Period
 2600.00

C. Full Name (Last, First, Middle Initial)
Dana Federman

Mailing Address **536 Dalehurst Ave.**

City **Los Angeles** State **CA** Zip Code **90024**

FEC ID number of contributing federal political committee. **C**

Name of Employer **N/A** Occupation **None**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 01 / 2013

Transaction ID : SA11AI.5184

Amount of Each Receipt this Period
 1400.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 15 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Barbara Fischlowitz-Leong

Mailing Address P.O. Box 10282

City Honolulu State HI Zip Code 96816

FEC ID number of contributing federal political committee. **C**

Name of Employer Assis. Tech. Res. of HI Occupation Executive Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 18 / 2013

Transaction ID : SA11AI.5460

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Lisa Fish

Mailing Address 5408 Larada Lane

City Edina State MN Zip Code 55436

FEC ID number of contributing federal political committee. **C**

Name of Employer Hennepin County Medical Center Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2013

Transaction ID : SA11AI.5238

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Brendon Fleming

Mailing Address 3133 Connecticut Ave NW Apt 422

City Washington State DC Zip Code 20008

FEC ID number of contributing federal political committee. **C**

Name of Employer Gibson, Dunn & Crutcher LLP Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2013

Transaction ID : SA11AI.5661

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1050.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 16 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) Michael Forman | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 26 / 2013 |
| Mailing Address 120 N. Robertson Blvd. Third Floor | | Transaction ID : SA11AI.5474 |
| City Los Angeles | State Zip Code CA 90048 | |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 1000.00 | |
| Name of Employer The Decurion Corporation | Occupation Chairman and Chief Executive Officer | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 2000.00 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) Jonathan Fung | | Date of Receipt M M / D D / Y Y Y Y Y 10 / 17 / 2013 |
| Mailing Address 240 West 10th Street | | Transaction ID : SA11AI.5243 |
| City New York | State Zip Code NY 10014 | |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 200.00 | |
| Name of Employer Self-employed | Occupation Consultant | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 700.00 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) Jonathan Fung | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 26 / 2013 |
| Mailing Address 240 West 10th Street | | Transaction ID : SA11AI.5605 |
| City New York | State Zip Code NY 10014 | |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 200.00 | |
| Name of Employer Self-employed | Occupation Consultant | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 900.00 | |

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 1400.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 17 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Makiko Kuroda Gaines

Mailing Address 95-1083 Kopalani St.

City Mililani State HI Zip Code 96789

FEC ID number of contributing federal political committee. **C**

Name of Employer Farrell's Hawaii Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2013

Transaction ID : SA11AI.5671

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Vito Galati

Mailing Address P.O. Box 939

City Honolulu State HI Zip Code 96808

FEC ID number of contributing federal political committee. **C**

Name of Employer Cades Schutte LLP Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2013

Transaction ID : SA11AI.5201

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Steven Gee

Mailing Address 250 W. 50th St.

City New York State NY Zip Code 10019

FEC ID number of contributing federal political committee. **C**

Name of Employer White & Case LLP Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 27 / 2013

Transaction ID : SA11AI.5596

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 18 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Matthew Gilbertson

Mailing Address 35 Palimalu Drive

City Honolulu State HI Zip Code 96817

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-employed Occupation Architect

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 19 / 2013

Transaction ID : SA11AI.5557

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
David M Ginn

Mailing Address 2141 Newport Pl. NW #3

City Washington State DC Zip Code 20037

FEC ID number of contributing federal political committee. **C**

Name of Employer Hogan Lovells Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 20 / 2013

Transaction ID : SA11AI.5553

Amount of Each Receipt this Period
1600.00

C. Full Name (Last, First, Middle Initial)
Nancy Grosfeld

Mailing Address One Towne Square Suite 1600

City Southfield State MI Zip Code 48076

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 11 / 2013

Transaction ID : SA11AI.5385

Amount of Each Receipt this Period
2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5200.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 19 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Nancy Grosfeld

Mailing Address **One Towne Square
Suite 1600**

City **Southfield** State **MI** Zip Code **48076**

FEC ID number of contributing federal political committee. **C**

Name of Employer **N/A** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 11 | | | 11 | | | 2013 | | | |

Transaction ID : SA11AI.5387

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Eric Hamaguchi

Mailing Address **149 Kaulana Way**

City **Honolulu** State **HI** Zip Code **96821**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Modern Hotel** Occupation **Manager**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 18 | | | 2013 | | | |

Transaction ID : SA11AI.5434

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ryan M. Harada

Mailing Address **425 South St.
Apt. 2402**

City **Honolulu** State **HI** Zip Code **96813**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Downtown Capital LLC** Occupation **Principal**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 10 | | | 14 | | | 2013 | | | |

Transaction ID : SA11AI.5202

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3350.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 20 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Brian Hermelin

Mailing Address 32205 Bingham Road

City Bingham Farms State MI Zip Code 48025

FEC ID number of contributing federal political committee. **C**

Name of Employer Private Equity Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.5654

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
Audrey Hidano

Mailing Address 1620 Hau St.

City Honolulu State HI Zip Code 96817

FEC ID number of contributing federal political committee. **C**

Name of Employer Hidano Construction Occupation Contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.5506

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Alan Ho

Mailing Address 1042 Kiionioni Loop

City Honolulu State HI Zip Code 96816

FEC ID number of contributing federal political committee. **C**

Name of Employer Jade Dynasty Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 18 / 2013

Transaction ID : SA11AI.5425

Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 78
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Edward K. Honda

Mailing Address 2122 Lime St.
#601

City Honolulu State HI Zip Code 96826

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.5502

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Vicki Hood

Mailing Address 130 N Garland Ct.
Apt 4205

City Chicago State IL Zip Code 60602

FEC ID number of contributing federal political committee. **C**

Name of Employer Kirkland & Ellis LLP Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 29 / 2013

Transaction ID : SA11AI.5575

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Marshall Hung

Mailing Address 2394 Aina Lani Way

City Honolulu State HI Zip Code 96822

FEC ID number of contributing federal political committee. **C**

Name of Employer Downtown Capital LLC Occupation Principal

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 14 / 2013

Transaction ID : SA11AI.5204

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 22 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Mitchell Imanaka

Mailing Address 3045 Wailani Rd.

City Honolulu State HI Zip Code 96813

FEC ID number of contributing federal political committee. **C**

Name of Employer Imanaka Asato LLLC Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 18 / 2013

Transaction ID : SA11AI.5447

Amount of Each Receipt this Period
600.00

B. Full Name (Last, First, Middle Initial)
Mitchell Imanaka

Mailing Address 3045 Wailani Rd.

City Honolulu State HI Zip Code 96813

FEC ID number of contributing federal political committee. **C**

Name of Employer Imanaka Asato LLLC Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 18 / 2013

Transaction ID : SA11AI.5458

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
Louise Ing

Mailing Address 1080 S Beretania St.
#504

City Honolulu State HI Zip Code 96814

FEC ID number of contributing federal political committee. **C**

Name of Employer Alston Hunt Floyd & Ing Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.5650

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 23 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Richard Ing

Mailing Address 841 Bishop Street
#860

City Honolulu State HI Zip Code 96813

FEC ID number of contributing federal political committee. **C**

Name of Employer Sheridan Ing Partners Occupation Real Estate Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2250.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 18 / 2013

Transaction ID : SA11AI.5567

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Lance M. Inouye

Mailing Address 2141-A Atherton Rd.

City Honolulu State HI Zip Code 96822

FEC ID number of contributing federal political committee. **C**

Name of Employer Ralph S. Inouye Co., Ltd. Occupation President & CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 10 / 2013

Transaction ID : SA11AI.5538

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Michael P. Irish

Mailing Address 966 Robello Ln.

City Honolulu State HI Zip Code 96817

FEC ID number of contributing federal political committee. **C**

Name of Employer Diamond Head Seafood Wholesale Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 26 / 2013

Transaction ID : SA11AI.5478

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 24 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Irongate Ala Wai LLC

Mailing Address 3939 Old Pali Road

City Honolulu State HI Zip Code 96817

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.5523

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Jeff J. Coelho & Associates LLC

Mailing Address 300 Silos Ct.

City Alpharetta State GA Zip Code 30004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.5521

Amount of Each Receipt this Period
 1500.00

C. Full Name (Last, First, Middle Initial)
Brandon Kam

Mailing Address 20438 Tricia Way

City Saratoga State CA Zip Code 95070

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
N/A None

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 25 / 2013

Transaction ID : SA11AI.5608

Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.5523

Confirmed that Irongate Ala Wai LLC is treated as a partnership for tax purposes, and has not elected to be treated as a corporation by the Internal Revenue Service. Irongate Ala Wai LLC is not publicly traded.

Form/Schedule: SA11AI

Transaction ID: SA11AI.5521

Confirmed that Jeff J. Coelho & Associates LLC is treated as a sole proprietorship for tax purposes, and has not elected to be treated as a corporation by the Internal Revenue Service. Jeff J. Coelho & Associates LLC is not publicly traded.

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 26 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
William Kaneko

Mailing Address 1040 19th Avenue

City Honolulu State HI Zip Code 96816

FEC ID number of contributing federal political committee. **C**

Name of Employer Alston Hunt Floyd & Ing Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 21 / 2013

Transaction ID : SA11AI.5550

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Donald Kang

Mailing Address 725 Kapiolani Blvd.
Apt. 1015

City Honolulu State HI Zip Code 96813

FEC ID number of contributing federal political committee. **C**

Name of Employer Royal Hawaiian Creation Occupation CEO & President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 23 / 2013

Transaction ID : SA11AI.5472

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Paul Kang

Mailing Address 1450 Ala Moana Blvd
96814

City Honolulu State HI Zip Code 96814

FEC ID number of contributing federal political committee. **C**

Name of Employer Island Vintage Coffee Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2013

Transaction ID : SA11AI.5293

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 27 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Sean Kass

Mailing Address 14 Woodland Rd.

City Roslyn State NY Zip Code 11576

FEC ID number of contributing federal political committee. **C**

Name of Employer Nishimura & Asahi Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 25 / 2013

Transaction ID : SA11AI.5610

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Randall Kau

Mailing Address 131 Riverside Drive
9A/B

City New York State NY Zip Code 10024

FEC ID number of contributing federal political committee. **C**

Name of Employer XELLC Occupation Researcher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 28 / 2013

Transaction ID : SA11AI.5274

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
John Komeji

Mailing Address 32 Kepola Place

City Honolulu State HI Zip Code 96817

FEC ID number of contributing federal political committee. **C**

Name of Employer Hawaiian Telcom Occupation SVP and General Counsel

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 23 / 2013

Transaction ID : SA11AI.5616

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

650.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 28 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

| | | |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Mi Kosasa | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2013 |
| Mailing Address 1319 Punahou St. #1040 | | Transaction ID : SA11AI.5491 |
| City Honolulu | State HI | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 2600.00 |
| Name of Employer Bradley Pacific Aviation | Occupation Vice President | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 2600.00 | |

| | | |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Mi Kosasa | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2013 |
| Mailing Address 1319 Punahou St. #1040 | | Transaction ID : SA11AI.5493 |
| City Honolulu | State HI | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 2600.00 |
| Name of Employer Bradley Pacific Aviation | Occupation Vice President | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 5200.00 | |

| | | |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Paul Kosasa | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 18 / 2013 |
| Mailing Address 1087 Waiholo Street | | Transaction ID : SA11AI.5451 |
| City Honolulu | State HI | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer ABC Stores | Occupation President | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1500.00 | |

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 6200.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 29 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

| | | | |
|---|---|--|--|
| Full Name (Last, First, Middle Initial) A. Dr. Thomas S. Kosasa | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2013 | |
| Mailing Address 1319 Punahou St. Suite 1040 | | Transaction ID : SA11AI.5488 | |
| City Honolulu State HI Zip Code 96828 | Amount of Each Receipt this Period 2600.00 | | |
| FEC ID number of contributing federal political committee. C | Name of Employer Occupation UH John Burns School of Med. Medical Professor | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 2600.00 | | |

| | | | |
|---|---|--|--|
| Full Name (Last, First, Middle Initial) B. Dr. Thomas S. Kosasa | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2013 | |
| Mailing Address 1319 Punahou St. Suite 1040 | | Transaction ID : SA11AI.5490 | |
| City Honolulu State HI Zip Code 96828 | Amount of Each Receipt this Period 2600.00 | | |
| FEC ID number of contributing federal political committee. C | Name of Employer Occupation UH John Burns School of Med. Medical Professor | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 5200.00 | | |

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) C. Julius Krein | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 21 / 2013 | |
| Mailing Address 160 E 91st St. Apt. 8l | | Transaction ID : SA11AI.5548 | |
| City New York State NY Zip Code 10128 | Amount of Each Receipt this Period 100.00 | | |
| FEC ID number of contributing federal political committee. C | Name of Employer Occupation The Belisarius Group, Inc. Consultant | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 350.00 | | |

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 5300.00 |
| TOTAL This Period (last page this line number only)..... | [] |

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 30 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Keith Kurahashi

Mailing Address P.O. Box 62027

City Honolulu State HI Zip Code 96839

FEC ID number of contributing federal political committee. **C**

Name of Employer: Kusao & Kurahashi, Inc. Occupation: Planner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2600.00

Date of Receipt: 12 / 31 / 2013

Transaction ID : SA11AI.5499

Amount of Each Receipt this Period: 600.00

B. Full Name (Last, First, Middle Initial)
Wai Tung Kwok

Mailing Address 3818 Anuhea St.

City Honolulu State HI Zip Code 96816

FEC ID number of contributing federal political committee. **C**

Name of Employer: PR LLC JD Occupation: JD

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 12 / 18 / 2013

Transaction ID : SA11AI.5427

Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
Collins Lam

Mailing Address 95-217 Polie Place

City Mililani State HI Zip Code 96789

FEC ID number of contributing federal political committee. **C**

Name of Employer: Department of Defense Occupation: Army Environmental Specialist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 12 / 23 / 2013

Transaction ID : SA11AI.5470

Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2100.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 31 OF 78
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Honggi Lee

Mailing Address 88 Linden St.

City Allston State MA Zip Code 02134

FEC ID number of contributing federal political committee. **C**

Name of Employer Athena Health Occupation Product Innovation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 16 / 2013

Transaction ID : SA11AI.5251

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Leonard K. P. Leong

Mailing Address 2747 Kalawao St.

City Honolulu State HI Zip Code 96822

FEC ID number of contributing federal political committee. **C**

Name of Employer Royal Contracting Occupation Contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 18 / 2013

Transaction ID : SA11AI.5443

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Lester Leu

Mailing Address 935 Waiholo St.

City Honolulu State HI Zip Code 96821

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-employed Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 01 / 2013

Transaction ID : SA11AI.5193

Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 32 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Steven Levinson

Mailing Address 3430-F Keahi Place

City Honolulu State HI Zip Code 96822

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired Hawaii Supreme Court Justice

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 05 / 2013

Transaction ID : SA11AI.5465

Amount of Each Receipt this Period
 100.00

B. Full Name (Last, First, Middle Initial)
Steven Levinson

Mailing Address 3430-F Keahi Place

City Honolulu State HI Zip Code 96822

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired Hawaii Supreme Court Justice

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 18 / 2013

Transaction ID : SA11AI.5452

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Bryan Li

Mailing Address 2411-C Liliha St.

City Honolulu State HI Zip Code 96817

FEC ID number of contributing federal political committee. **C**

Name of Employer BlackSand Capital Occupation Executive Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 26 / 2013

Transaction ID : SA11AI.5601

Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 33 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Jonathan Lin

Mailing Address 173 Maono Pl.

City Honolulu State HI Zip Code 96821

FEC ID number of contributing federal political committee. **C**

Name of Employer Contech Engineering Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 18 / 2013

Transaction ID : SA11AI.5448

Amount of Each Receipt this Period
 1500.00

B. Full Name (Last, First, Middle Initial)
Jerry Ling

Mailing Address 1821 Kumakani Place

City Honolulu State HI Zip Code 96821

FEC ID number of contributing federal political committee. **C**

Name of Employer Jones Day Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 28 / 2013

Transaction ID : SA11AI.5583

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Bernice Littman

Mailing Address 1541 Kalaniwai Pl.

City Honolulu State HI Zip Code 96821

FEC ID number of contributing federal political committee. **C**

Name of Employer Cades Schutte LLP Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 18 / 2013

Transaction ID : SA11AI.5422

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 34 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Jeff Liu | | Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 06 / 2013 |
| Mailing Address 2833 Round Top Dr. | | Transaction ID : SA11AI.5413 |
| City Honolulu | State HI | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Chinese American Corporation | Occupation President | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 500.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Chanel Louie | | Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2013 |
| Mailing Address 4460 Kilauea Avenue | | Transaction ID : SA11AI.5636 |
| City Honolulu | State HI | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer N/A | Occupation Student | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 500.00 | |

| | | |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Linda Louie | | Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 28 / 2013 |
| Mailing Address 4460 Kilauea Avenue | | Transaction ID : SA11AI.5290 |
| City Honolulu | State HI | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer N/A | Occupation Retired | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 3300.00 | |

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 1200.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 35 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

| | | | |
|---|----------|--|--|
| Full Name (Last, First, Middle Initial) A. Flora Lu | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2013 | |
| Mailing Address 2030A Fern St. | | Transaction ID : SA11AI.5535 | |
| City Honolulu | State HI | Zip Code 96826 | |
| FEC ID number of contributing federal political committee. | | Amount of Each Receipt this Period 500.00 | |
| Name of Employer Self-employed | | Occupation Designer | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Election Cycle-to-Date 1500.00 | |

| | | | |
|---|----------|--|--|
| Full Name (Last, First, Middle Initial) B. Ivan Lui-Kwan | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 18 / 2013 | |
| Mailing Address 834 Puuikena Dr. | | Transaction ID : SA11AI.5423 | |
| City Honolulu | State HI | Zip Code 96821 | |
| FEC ID number of contributing federal political committee. | | Amount of Each Receipt this Period 500.00 | |
| Name of Employer Starn O'Toole Marcus & Fisher | | Occupation Attorney | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Election Cycle-to-Date 1500.00 | |

| | | | |
|---|----------|--|--|
| Full Name (Last, First, Middle Initial) C. Christopher Mai | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 17 / 2013 | |
| Mailing Address 93 Niuiki Circle | | Transaction ID : SA11AI.5568 | |
| City Honolulu | State HI | Zip Code 96821 | |
| FEC ID number of contributing federal political committee. | | Amount of Each Receipt this Period 250.00 | |
| Name of Employer Self-employed | | Occupation Physician | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Election Cycle-to-Date 750.00 | |

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 1250.00 |
| TOTAL This Period (last page this line number only)..... | _____ |

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 36 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Bruce Mann

Mailing Address 24 Linnaean Street

City State Zip Code
Cambridge MA 02138

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Harvard University Law Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 11 / 2013

Transaction ID : SA11AI.5229

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Eric Masutomi

Mailing Address 1212 Nuuanu Avenue #1510

City State Zip Code
Honolulu HI 96817

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Honolulu Seawater Air Conditio CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 23 / 2013

Transaction ID : SA11AI.5613

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Colbert Matsumoto

Mailing Address 1766 Hanahanai Place

City State Zip Code
Honolulu HI 96821

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Island Insurance Company, Ltd. Chairman and Chief Executive Officer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 23 / 2013

Transaction ID : SA11AI.5615

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 37 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Kenneth T. Matsuura

Mailing Address 803 Ainapo St.

City Honolulu State HI Zip Code 96825

FEC ID number of contributing federal political committee. **C**

Name of Employer Downtown Capital LLC Occupation Principal

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 14 / 2013

Transaction ID : SA11AI.5209

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Kekoa McClellan

Mailing Address 87-855 Farrington Highway
B

City Maili State HI Zip Code 96792

FEC ID number of contributing federal political committee. **C**

Name of Employer Pelatron Occupation Director of Budget and Business Admin.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1145.83

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.5676

Amount of Each Receipt this Period
145.83

In-kind - Food and Beverages for Campaign Meeting

C. Full Name (Last, First, Middle Initial)
Tori Miyagi

Mailing Address 42-652 Apuakea Street

City Kaneohe State HI Zip Code 96744

FEC ID number of contributing federal political committee. **C**

Name of Employer Democracy Alliance Occupation Investment Services

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 28 / 2013

Transaction ID : SA11AI.5278

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

645.83

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 38 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Dr. Edison Miyawaki

Mailing Address 1010 Wilder Ave.

City Honolulu State HI Zip Code 96822

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 18 / 2013

Transaction ID : SA11AI.5439

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
George Morris

Mailing Address 45-302 Puuloko Pl.

City Kaneohe State HI Zip Code 96744

FEC ID number of contributing federal political committee. **C**

Name of Employer Capitol Consultants of Hawaii Occupation Principal

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.5507

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Alicia Moy

Mailing Address 1288 Ala Moana Blvd Apt. 11D

City Honolulu State HI Zip Code 96814

FEC ID number of contributing federal political committee. **C**

Name of Employer Hawaii Gas Occupation President and CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2013

Transaction ID : SA11AI.5586

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 39 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) A. Ritchie Mudd | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 18 / 2013 | |
| Mailing Address 4720 Halehoola Place | | Transaction ID : SA11AI.5453 | |
| City Honolulu State HI Zip Code 96816 | Amount of Each Receipt this Period 1600.00 | | |
| FEC ID number of contributing federal political committee. C | Name of Employer Occupation RSI Roofing Founder | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 2600.00 | | |

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) B. Cory Nomura | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 21 / 2013 | |
| Mailing Address 228 Manhattan Avenue #2 | | Transaction ID : SA11AI.5549 | |
| City Brooklyn State NY Zip Code 11206 | Amount of Each Receipt this Period 100.00 | | |
| FEC ID number of contributing federal political committee. C | Name of Employer Occupation Andrea Rosen Gallery, Inc. Director | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 250.00 | | |

| | | | |
|---|---|--|--|
| Full Name (Last, First, Middle Initial) C. Charles Ogletree | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2013 | |
| Mailing Address 54 Pemberton Street | | Transaction ID : SA11AI.5645 | |
| City Cambridge State MA Zip Code 02140 | Amount of Each Receipt this Period 2500.00 | | |
| FEC ID number of contributing federal political committee. C | Name of Employer Occupation Harvard University Law Professor | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 2500.00 | | |

| | |
|---|-------------|
| SUBTOTAL of Receipts This Page (optional)..... | 4200.00 |
| TOTAL This Period (last page this line number only)..... | [Empty Box] |

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 40 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Lloyd Okubo

Mailing Address 99-128 Aiea Heights Drive
Suite 101A

City Aiea State HI Zip Code 96701

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-employed Occupation Insurance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 31 / 2013

Transaction ID : SA11AI.5659

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Nathan Okubo

Mailing Address 600 Queen Street
Apt. 1211

City Honolulu State HI Zip Code 96813

FEC ID number of contributing federal political committee. **C**

Name of Employer Cades Schutte LLP Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2269.36

Date of Receipt
M M / D D / Y Y Y Y
12 / 30 / 2013

Transaction ID : SA11AI.5665

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Rei Onishi

Mailing Address 7441 Brook Dale Drive

City Citrus Heights State CA Zip Code 95621

FEC ID number of contributing federal political committee. **C**

Name of Employer State of California Occupation Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 28 / 2013

Transaction ID : SA11AI.5579

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 41 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Robin Oura

Mailing Address 92-1348 Uahanai St.

City Kapolei State HI Zip Code 96707

FEC ID number of contributing federal political committee. **C**

Name of Employer Dura Constructors Inc. Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.5504

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Jeffrey Overton

Mailing Address 3506 Anela Place

City Honolulu State HI Zip Code 96822

FEC ID number of contributing federal political committee. **C**

Name of Employer Group 70 International, Inc. Occupation Land Use Planner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 07 / 2013

Transaction ID : SA11AI.5461

Amount of Each Receipt this Period
 600.00

C. Full Name (Last, First, Middle Initial)
Glenn Oyama

Mailing Address 3163 Pali Hwy.

City Honolulu State HI Zip Code 96817

FEC ID number of contributing federal political committee. **C**

Name of Employer Nakamura, Oyama & Assoc., Inc. Occupation Electrical Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.5621

Amount of Each Receipt this Period
 600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 42 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Laura Ozak

Mailing Address 5230 Kuaiwi Place

City Honolulu State HI Zip Code 96821

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-employed Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 22 / 2013

Transaction ID : SA11AI.5407

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Andrew Pacelli

Mailing Address 1500 Sheridan Road
Unit 3F

City Wilmette State IL Zip Code 60091

FEC ID number of contributing federal political committee. **C**

Name of Employer U.S. Department of State Occupation Diplomat

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.5634

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Jinha Park

Mailing Address 5825 Lincoln Avenue
Ste D330

City Buena Park State CA Zip Code 90620

FEC ID number of contributing federal political committee. **C**

Name of Employer City of Hope Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 19 / 2013

Transaction ID : SA11AI.5561

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4100.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.5634

\$100 of this \$2600 credit card donation was refunded to Mr. Andrew Pacelli on January 2, 2014. This \$100 refund will be noted as a refund in the April Quarterly report.

Form/Schedule:

Transaction ID:

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 44 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

| | | | |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. John Park | | Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 15 / 2013 | |
| Mailing Address 87 South Street | | Transaction ID : SA11AI.5259 | |
| City Brookline | State MA | Zip Code 02467 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 | |
| Name of Employer Harvard University | Occupation Lecturer | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 250.00 | | |

| | | | |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. John Park | | Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2013 | |
| Mailing Address 87 South Street | | Transaction ID : SA11AI.5644 | |
| City Brookline | State MA | Zip Code 02467 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 300.00 | |
| Name of Employer Harvard University | Occupation Lecturer | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 550.00 | | |

| | | | |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. Sarah Park | | Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2013 | |
| Mailing Address 222 Lincoln Place #3 | | Transaction ID : SA11AI.5649 | |
| City Brooklyn | State NY | Zip Code 11217 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 | |
| Name of Employer Frankfurt Kurnit Klein & Selz | Occupation Attorney | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 225.00 | | |

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 650.00 |
| TOTAL This Period (last page this line number only)..... | [] |

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 45 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Herbert Pell

Mailing Address 52 Barnes St.

City Providence State RI Zip Code 02906

FEC ID number of contributing federal political committee. **C**

Name of Employer US Department of Education Occupation Government Employee

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2013

Transaction ID : SA11AI.5220

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Richard Pentecost

Mailing Address 935 Noio St.

City Honolulu State HI Zip Code 96816

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-employed Occupation Business Owner and Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 09 / 2013

Transaction ID : SA11AI.5541

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
John H. Radcliffe

Mailing Address 1010 Wilder Ave.

City Honolulu State HI Zip Code 96822

FEC ID number of contributing federal political committee. **C**

Name of Employer Radcliffe & Associates Occupation Principal

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.5509

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 46 OF 78
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Mark Robinson

Mailing Address 3207 Diamond Head Road

City Honolulu State HI Zip Code 96815

FEC ID number of contributing federal political committee. **C**

Name of Employer HMI Occupation Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 23 / 2013

Transaction ID : SA11AI.5468

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Marc Rousseau

Mailing Address 4658 Sierra Drive
737-1505

City Honolulu State HI Zip Code 96816

FEC ID number of contributing federal political committee. **C**

Name of Employer Cades Schutte LLP Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 18 / 2013

Transaction ID : SA11AI.5424

Amount of Each Receipt this Period
 200.00

C. Full Name (Last, First, Middle Initial)
Paul Saito

Mailing Address 2204 Halekoa Drive

City Honolulu State HI Zip Code 96821

FEC ID number of contributing federal political committee. **C**

Name of Employer Cades Schutte LLP Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.5635

Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1300.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 47 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Asif Satchu

Mailing Address 9665 Wilshire Blvd.
2nd Floor

City State Zip Code
Beverly Hills CA 90212

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Media Rights Capital CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 12 / 2013

Transaction ID : SA11AI.5405

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
Stan Sato

Mailing Address 72 Makaweli Street

City State Zip Code
Honolulu HI 96825

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Gateside, Inc. Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 26 / 2013

Transaction ID : SA11AI.5599

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
David Schulmeister

Mailing Address 178 Ohana St.

City State Zip Code
Kailua HI 96734

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Cades Schutte LLP Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 18 / 2013

Transaction ID : SA11AI.5445

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 48 OF 78
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Scott W. Settle

Mailing Address 47 Mahiloa Pl.

City State Zip Code
Kailua HI 96734

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Scott Settle Attorney at Law Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2013

Transaction ID : SA11AI.5668

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Vincent R. Shigekuni

Mailing Address 3138 Waiialae Ave.
#1009

City State Zip Code
Honolulu HI 96816

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PBR Hawaii Planner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 18 / 2013

Transaction ID : SA11AI.5420

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Albert Shigemura

Mailing Address 87-2020 Farrington Highway

City State Zip Code
Waianae HI 96792

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PVT Land Company Ltd. President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.5527

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 49 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Nan Shin

Mailing Address 3170 Noela St.

City Honolulu State HI Zip Code 96815

FEC ID number of contributing federal political committee. **C**

Name of Employer Laumaka LLC Occupation Developer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 06 / 2013

Transaction ID : SA11AI.5462

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
Nan Shin

Mailing Address 3170 Noela St.

City Honolulu State HI Zip Code 96815

FEC ID number of contributing federal political committee. **C**

Name of Employer Laumaka LLC Occupation Developer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 06 / 2013

Transaction ID : SA11AI.5464

Amount of Each Receipt this Period
 2600.00

C. Full Name (Last, First, Middle Initial)
Marshall Silver

Mailing Address 28 Bedford St.
#4

City New York State NY Zip Code 10014

FEC ID number of contributing federal political committee. **C**

Name of Employer Tobias Capital Occupation Investment Analyst

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 27 / 2013

Transaction ID : SA11AI.5592

Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5700.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 50 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Nicholas Smyth

Mailing Address 1624 St. NW
Apt. 303

City Washington State DC Zip Code 20009

FEC ID number of contributing federal political committee. **C**

Name of Employer CFPB Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 01 / 2013

Transaction ID : SA11AI.5381

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Nicholas Smyth

Mailing Address 1624 St. NW
Apt. 303

City Washington State DC Zip Code 20009

FEC ID number of contributing federal political committee. **C**

Name of Employer CFPB Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 30 / 2013

Transaction ID : SA11AI.5662

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Gail Tamashiro

Mailing Address 3050 Ala Puaala Pl.

City Honolulu State HI Zip Code 96816

FEC ID number of contributing federal political committee. **C**

Name of Employer Cades Schutte LLP Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 18 / 2013

Transaction ID : SA11AI.5430

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

950.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 51 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Aaron A. Tampos

Mailing Address 97-1765 Puhiko St.

City Ewa Beach State HI Zip Code 96706

FEC ID number of contributing federal political committee. **C**

Name of Employer Tampos Trucking Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.5497

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Gigi Tang

Mailing Address 888 Main St.
Apt. 943

City New York State NY Zip Code 10044

FEC ID number of contributing federal political committee. **C**

Name of Employer Spotify USA Inc. Occupation HR Generalist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.5640

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
David Tanoue

Mailing Address 600 Queen Street
Apt. 2906

City Honolulu State HI Zip Code 96813

FEC ID number of contributing federal political committee. **C**

Name of Employer R.M. Towill Corporation Occupation Administrator/ Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 20 / 2013

Transaction ID : SA11AI.5554

Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 52 OF 78
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Tin Myaing Thein

Mailing Address 683 Kaumakani Street

City Honolulu State HI Zip Code 96825

FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Gateway Center Occupation Administrator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 4100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 06 / 2013

Transaction ID : SA11AI.5412

Amount of Each Receipt this Period
 _____ 500.00

B. Full Name (Last, First, Middle Initial)
Tin Myaing Thein

Mailing Address 683 Kaumakani Street

City Honolulu State HI Zip Code 96825

FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Gateway Center Occupation Administrator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 5100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.5624

Amount of Each Receipt this Period
 _____ 1000.00

C. Full Name (Last, First, Middle Initial)
Keith Vieira

Mailing Address 4757 Aukai Ave.

City Honolulu State HI Zip Code 96816

FEC ID number of contributing federal political committee. **C**

Name of Employer Starwood Hotels & Resorts Occupation Senior Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.5525

Amount of Each Receipt this Period
 _____ 500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

_____ 2000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 53 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Scott Wallace

Mailing Address 3375 Koapaka St.
Suite F238-6

City Honolulu State HI Zip Code 96819

FEC ID number of contributing federal political committee. **C**

Name of Employer Wallace Theaters Occupation Movie Theater Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 16 / 2013

Transaction ID : SA11AI.5480

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Benjamin Wang

Mailing Address 719 Walea Pl.

City Honolulu State HI Zip Code 96817

FEC ID number of contributing federal political committee. **C**

Name of Employer BlackSand Capital Occupation Real Estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.5638

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Jerry Wang

Mailing Address 635 W. 42nd #4K

City New York State NY Zip Code 10036

FEC ID number of contributing federal political committee. **C**

Name of Employer CITAM Occupation Finance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2013

Transaction ID : SA11AI.5672

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1100.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 54 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
William J. Wilson

Mailing Address 2521 Halekoa Dr.

City Honolulu State HI Zip Code 96821

FEC ID number of contributing federal political committee. **C**

Name of Employer Hawaiian Dredging Construction Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2013

Transaction ID : SA11AI.5195

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Robert M. Witt

Mailing Address 1487 Hiikala Place #44

City Honolulu State HI Zip Code 96816

FEC ID number of contributing federal political committee. **C**

Name of Employer Hawaii Association of Indepen. Occupation Executive Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 26 / 2013

Transaction ID : SA11AI.5477

Amount of Each Receipt this Period
 750.00

C. Full Name (Last, First, Middle Initial)
Bob Wu

Mailing Address 101 W. 24th Street #17B

City New York State NY Zip Code 10011

FEC ID number of contributing federal political committee. **C**

Name of Employer Ziff Brothers Investments Occupation Senior Analyst

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2013

Transaction ID : SA11AI.5275

Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 55 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Bob Wu

Mailing Address 101 W. 24th Street
#17B

City New York State NY Zip Code 10011

FEC ID number of contributing federal political committee. **C**

Name of Employer Ziff Brothers Investments Occupation Senior Analyst

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
900.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 22 / 2013

Transaction ID : SA11AI.5547

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
Hank Wuh

Mailing Address 305 Halaki Street

City Honolulu State HI Zip Code 96821

FEC ID number of contributing federal political committee. **C**

Name of Employer SKAI Ventures, LLC Occupation Chief Executive Officer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 26 / 2013

Transaction ID : SA11AI.5475

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Hank Wuh

Mailing Address 305 Halaki Street

City Honolulu State HI Zip Code 96821

FEC ID number of contributing federal political committee. **C**

Name of Employer SKAI Ventures, LLC Occupation Chief Executive Officer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2013

Transaction ID : SA11AI.5623

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 56 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Mark H. Yamakawa

Mailing Address 1602 B Alewa Drive

City Honolulu State HI Zip Code 96817

FEC ID number of contributing federal political committee. **C**

Name of Employer The Queen's Health Systems Occupation EVP & COO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 17 / 2013

Transaction ID : SA11AI.5569

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Jodi Yamamoto

Mailing Address 612 Ahakea St.

City Honolulu State HI Zip Code 96816

FEC ID number of contributing federal political committee. **C**

Name of Employer Yamamoto Caliboso Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 26 / 2013

Transaction ID : SA11AI.5481

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Gregg T. Yamanaka

Mailing Address 3473 A Akaka Place

City Honolulu State HI Zip Code 96822

FEC ID number of contributing federal political committee. **C**

Name of Employer Learning Biz Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.5632

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 57 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Peter Yanagawa

Mailing Address 765 Amana St.
Suite 500

City Honolulu State HI Zip Code 96814-3251

FEC ID number of contributing federal political committee. **C**

Name of Employer PY, Inc. Occupation Real Estate Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 14 / 2013

Transaction ID : SA11AI.5206

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Tay-Ing Yang

Mailing Address 46-001 Kamehameha Hwy.
Suite 206

City Kaneohe State HI Zip Code 96744

FEC ID number of contributing federal political committee. **C**

Name of Employer Castle Medical Center Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 18 / 2013

Transaction ID : SA11AI.5457

Amount of Each Receipt this Period
 600.00

C. Full Name (Last, First, Middle Initial)
Tay-Ing Yang

Mailing Address 46-001 Kamehameha Hwy.
Suite 206

City Kaneohe State HI Zip Code 96744

FEC ID number of contributing federal political committee. **C**

Name of Employer Castle Medical Center Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 18 / 2013

Transaction ID : SA11AI.5459

Amount of Each Receipt this Period
 900.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 58 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Eric Yeaman

Mailing Address 647 Ulumaika Street

City Honolulu State HI Zip Code 96816

FEC ID number of contributing federal political committee. **C**

Name of Employer Hawaiian Telcom Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 01 / 2013

Transaction ID : SA11AI.5189

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Gordon C. K. Yee

Mailing Address 1298 Lunalilo Home Rd.

City Honolulu State HI Zip Code 96825

FEC ID number of contributing federal political committee. **C**

Name of Employer Grace Pacific Corporation Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 18 / 2013

Transaction ID : SA11AI.5437

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Darwin Yip

Mailing Address 4 Longfellow Place

City Boston State MA Zip Code 02114

FEC ID number of contributing federal political committee. **C**

Name of Employer Massachussets General Hospital Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 26 / 2013

Transaction ID : SA11AI.5602

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 59 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Henry Yoon

Mailing Address 1288 Ala Moana Blvd.
#6B

City Honolulu State HI Zip Code 96814

FEC ID number of contributing federal political committee. **C**

Name of Employer Cafe Duck Butt Occupation Restaurateur

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 27 / 2013

Transaction ID : SA11AI.5588

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Joseph Young

Mailing Address 317 Nenu Street

City Honolulu State HI Zip Code 96821

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Dentist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 19 / 2013

Transaction ID : SA11AI.5338

Amount of Each Receipt this Period
 25.00

C. Full Name (Last, First, Middle Initial)
Joseph Young

Mailing Address 317 Nenu Street

City Honolulu State HI Zip Code 96821

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Dentist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 26 / 2013

Transaction ID : SA11AI.5476

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1050.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 60 OF 78 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Jixiong Zhu

Mailing Address 334 Seaside Ave.
Suite 110

City Honolulu State HI Zip Code 96815

FEC ID number of contributing federal political committee. **C**

Name of Employer Z Properties, LLC Occupation Principal Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2013

Transaction ID : SA11AI.5627

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

100.00

114845.83

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 61 OF 78
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

A. Full Name (Last, First, Middle Initial)
Hilton Worldwide Political Action Committee

Mailing Address 7930 Jones Brance Dr.
Suite 1100

City McLean State VA Zip Code 22102

FEC ID number of contributing federal political committee. **C** C00213074

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 10 / 2013

Transaction ID : SA11C.5772

Amount of Each Receipt this Period
1000.00

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

1000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 62 OF 78 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. ActBlue | | Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2013 |
| Mailing Address 14 Arrow Street Suite 11 | | Amount of Each Disbursement this Period 247.08 |
| City Cambridge | State MA | |
| Zip Code 02138 | Purpose of Disbursement Merchant Fees | Transaction ID : SB17.5685 |
| Candidate Name | 003 Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. ActBlue | | Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2013 |
| Mailing Address 14 Arrow Street Suite 11 | | Amount of Each Disbursement this Period 72.50 |
| City Cambridge | State MA | |
| Zip Code 02138 | Purpose of Disbursement Merchant Fees | Transaction ID : SB17.5686 |
| Candidate Name | 003 Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. ActBlue | | Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2013 |
| Mailing Address 14 Arrow Street Suite 11 | | Amount of Each Disbursement this Period 96.54 |
| City Cambridge | State MA | |
| Zip Code 02138 | Purpose of Disbursement Merchant Fees | Transaction ID : SB17.5687 |
| Candidate Name | 003 Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 416.12 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 63 OF 78 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. ActBlue | | Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2013 |
| Mailing Address 14 Arrow Street Suite 11 | | Amount of Each Disbursement this Period 7.91 Transaction ID : SB17.5688 |
| City Cambridge | State MA Zip Code 02138 | |
| Purpose of Disbursement Merchant Fees | 003 Category/Type | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. ActBlue | | Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2013 |
| Mailing Address 14 Arrow Street Suite 11 | | Amount of Each Disbursement this Period 35.55 Transaction ID : SB17.5689 |
| City Cambridge | State MA Zip Code 02138 | |
| Purpose of Disbursement Merchant Fees | 003 Category/Type | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) c. ActBlue | | Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2013 |
| Mailing Address 14 Arrow Street Suite 11 | | Amount of Each Disbursement this Period 222.79 Transaction ID : SB17.5690 |
| City Cambridge | State MA Zip Code 02138 | |
| Purpose of Disbursement Merchant Fees | 003 Category/Type | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 266.25 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 64 OF 78 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. ActBlue | | Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2013 |
| Mailing Address 14 Arrow Street Suite 11 | | Amount of Each Disbursement this Period 164.92 Transaction ID : SB17.5691 |
| City Cambridge | State MA Zip Code 02138 | |
| Purpose of Disbursement Merchant Fees | Category/Type 003 | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. ActBlue | | Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2013 |
| Mailing Address 14 Arrow Street Suite 11 | | Amount of Each Disbursement this Period 43.45 Transaction ID : SB17.5692 |
| City Cambridge | State MA Zip Code 02138 | |
| Purpose of Disbursement Merchant Fees | Category/Type 003 | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) c. ActBlue | | Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2013 |
| Mailing Address 14 Arrow Street Suite 11 | | Amount of Each Disbursement this Period 3.95 Transaction ID : SB17.5693 |
| City Cambridge | State MA Zip Code 02138 | |
| Purpose of Disbursement Merchant Fees | Category/Type 003 | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 212.32 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 65 OF 78 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. ActBlue | | Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2013 |
| Mailing Address 14 Arrow Street Suite 11 | | Amount of Each Disbursement this Period 230.09 Transaction ID : SB17.5694 |
| City Cambridge | State MA Zip Code 02138 | |
| Purpose of Disbursement Merchant Fees | Category/Type 003 | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. ActBlue | | Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2013 |
| Mailing Address 14 Arrow Street Suite 11 | | Amount of Each Disbursement this Period 125.42 Transaction ID : SB17.5695 |
| City Cambridge | State MA Zip Code 02138 | |
| Purpose of Disbursement Merchant Fees | Category/Type 003 | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) c. ActBlue | | Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2013 |
| Mailing Address 14 Arrow Street Suite 11 | | Amount of Each Disbursement this Period 215.31 Transaction ID : SB17.5696 |
| City Cambridge | State MA Zip Code 02138 | |
| Purpose of Disbursement Merchant Fees | Category/Type 003 | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 570.82 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 66 OF 78 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. ActBlue | | Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2013 |
| Mailing Address 14 Arrow Street Suite 11 | | Amount of Each Disbursement this Period 401.37 Transaction ID : SB17.5697 |
| City Cambridge | State MA | |
| Zip Code 02138 | Purpose of Disbursement Merchant Fees | Category/ Type 003 |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. ActBlue | | Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013 |
| Mailing Address 14 Arrow Street Suite 11 | | Amount of Each Disbursement this Period 727.67 Transaction ID : SB17.5698 |
| City Cambridge | State MA | |
| Zip Code 02138 | Purpose of Disbursement Merchant Fees | Category/ Type 003 |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) c. Stanley Chang | | Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2013 |
| Mailing Address 637 Ulumaika Street | | Amount of Each Disbursement this Period 157.80 Transaction ID : SB17.5742 |
| City Honolulu | State HI | |
| Zip Code 96816 | Purpose of Disbursement Reimbursement - American Airlines | Category/ Type 002 |
| Candidate Name | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: HI District: 01 | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1286.84 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 67 OF 78 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Stanley Chang | | Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2013 |
| Mailing Address 637 Ulumaika Street | | Amount of Each Disbursement this Period 1250.71 Transaction ID : SB17.5745 |
| City Honolulu State HI Zip Code 96816 | Purpose of Disbursement Reimbursement - United Airlines Candidate Name Category/Type 002 | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 01 | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. United Airlines | | Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2013 |
| Mailing Address 233 S. Wacker Drive | | Amount of Each Disbursement this Period 1250.71 Transaction ID : SB17.5745.0 [MEMO ITEM] |
| City Chicago State IL Zip Code 60606 | Purpose of Disbursement Vendor - Travel Cost - Airfare Candidate Name Category/Type 002 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) c. Stanley Chang | | Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2013 |
| Mailing Address 637 Ulumaika Street | | Amount of Each Disbursement this Period 607.81 Transaction ID : SB17.5739 |
| City Honolulu State HI Zip Code 96816 | Purpose of Disbursement Reimbursement - Sonoma Restaurant Candidate Name Category/Type 007 | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 01 | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1858.52 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 68 OF 78 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Sonoma Restaurant | | Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2013 |
| Mailing Address 233 Pennsylvania Ave. | | Amount of Each Disbursement this Period 607.81 |
| City Washington | State DC Zip Code 20003 | |
| Purpose of Disbursement Vendor - Food and Beverages | Category/Type 007 | Transaction ID : SB17.5739.0 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Democratic Party of Hawaii | | Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2013 |
| Mailing Address 404 Ward Ave. Suite 200 | | Amount of Each Disbursement this Period 1250.00 |
| City Honolulu | State HI Zip Code 96814 | |
| Purpose of Disbursement Vendor - Voter Database | Category/Type 006 | Transaction ID : SB17.5765 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Alexander Koo | | Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2013 |
| Mailing Address 23-52 Bell Blvd. | | Amount of Each Disbursement this Period 518.60 |
| City New York | State NY Zip Code 11360 | |
| Purpose of Disbursement Reimbursement - Stella Wines & Spirits | Category/Type 007 | Transaction ID : SB17.5761 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1768.60 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 69 OF 78 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Stella Wines & Spirits | | Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2013 |
| Mailing Address 1289 Clint Moore Road | | Amount of Each Disbursement this Period 518.60 |
| City Boca Raton | State FL | |
| Zip Code 33487 | | [MEMO ITEM] |
| Purpose of Disbursement Vendor - Beverages | | |
| Candidate Name | | |
| Office Sought: | House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |
| State: | District: | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Laird Christianson Advertising | | Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2013 |
| Mailing Address 1003 Bishop St. 9th Floor | | Amount of Each Disbursement this Period 5039.43 |
| City Honolulu | State HI | |
| Zip Code 96813 | | |
| Purpose of Disbursement Vendor - Media Consulting | | Category/ Type 004 |
| Candidate Name | | |
| Office Sought: | House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |
| State: | District: | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) c. Trung Lam | | Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2013 |
| Mailing Address 46-244 Kalali St. | | Amount of Each Disbursement this Period 123.49 |
| City Kaneohe | State HI | |
| Zip Code 96744 | | |
| Purpose of Disbursement Reimbursement - Home Depot | | Category/ Type 007 |
| Candidate Name | | |
| Office Sought: | House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |
| State: | District: | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 5162.92 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 70 OF 78 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Trung Lam | | Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2013 |
| Mailing Address 46-244 Kalali St. | | Amount of Each Disbursement this Period 202.51 Transaction ID : SB17.5754 |
| City Kaneohe State HI Zip Code 96744 | Purpose of Disbursement Reimbursement - Home Depot 007 Category/Type | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Home Depot | | Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2013 |
| Mailing Address 421 Alakawa St. | | Amount of Each Disbursement this Period 202.51 Transaction ID : SB17.5754.0 [MEMO ITEM] |
| City Honolulu State HI Zip Code 96817 | Purpose of Disbursement Vendor - Supplies for Campaign Event 007 Category/Type | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Courtney Matsuki | | Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2013 |
| Mailing Address 1539 Magazine St. | | Amount of Each Disbursement this Period 50.00 Transaction ID : SB17.5712 |
| City Honolulu State HI Zip Code 96822 | Purpose of Disbursement Reimbursement - Facebook 004 Category/Type | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 252.51 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 71 OF 78 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Courtney Matsuki | | Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2013 |
| Mailing Address 1539 Magazine St. | | Amount of Each Disbursement this Period 18.00 Transaction ID : SB17.5675 |
| City Honolulu State HI Zip Code 96822 | Purpose of Disbursement In-kind - District Maps | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Kekoa McClellan | | Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013 |
| Mailing Address 87-855 Farrington Highway B | | Amount of Each Disbursement this Period 145.83 Transaction ID : SB17.5677 |
| City Maili State HI Zip Code 96792 | Purpose of Disbursement In-kind - Food and Beverages for Campaign Meeting | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. NGP VAN, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2013 |
| Mailing Address 1101 15th St., NW Suite 500 | | Amount of Each Disbursement this Period 1650.00 Transaction ID : SB17.5758 |
| City Washington State DC Zip Code 20005 | Purpose of Disbursement Vendor - Donor Database Services | |
| Candidate Name | Category/Type 003 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 1813.83 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 72 OF 78 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Pacific Creations Hawaii, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013 |
| Mailing Address 4384 Malaai St. | | Amount of Each Disbursement this Period 3182.14 |
| City Honolulu | State HI Zip Code 96818 | |
| Purpose of Disbursement Vendor - Campaign Shirts | Category/Type 006 | Transaction ID : SB17.5731 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Servco Insurance Services | | Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2013 |
| Mailing Address 700 Bishop St. Suite 1400 | | Amount of Each Disbursement this Period 764.00 |
| City Honolulu | State HI Zip Code 96813 | |
| Purpose of Disbursement Vendor - Event Insurance | Category/Type 007 | Transaction ID : SB17.5722 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Service Printers Hawaii Inc. | | Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013 |
| Mailing Address 1829 Dillingham Boulevard | | Amount of Each Disbursement this Period 208.37 |
| City Honolulu | State HI Zip Code 96819 | |
| Purpose of Disbursement Vendor - Volunteer Cards | Category/Type 006 | Transaction ID : SB17.5733 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 4154.51 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 73 OF 78 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Service Printers Hawaii Inc. | | Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2013 |
| Mailing Address 1829 Dillingham Boulevard | | Amount of Each Disbursement this Period 1361.23 Transaction ID : SB17.5734 |
| City Honolulu | State HI Zip Code 96819 | |
| Purpose of Disbursement Vendor - Printing of Walking Piece | Category/Type 004 | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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|---|--|--|
| Full Name (Last, First, Middle Initial) B. SMS Research and Marketing Services, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013 |
| Mailing Address 1042 Fort Street Mall Suite 200 | | Amount of Each Disbursement this Period 13560.20 Transaction ID : SB17.5768 |
| City Honolulu | State HI Zip Code 96813 | |
| Purpose of Disbursement Vendor - Polling Consulting | Category/Type 005 | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) c. SMS Research and Marketing Services, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013 |
| Mailing Address 1042 Fort Street Mall Suite 200 | | Amount of Each Disbursement this Period 11623.03 Transaction ID : SB17.5717 |
| City Honolulu | State HI Zip Code 96813 | |
| Purpose of Disbursement Vendor - Surveys | Category/Type 005 | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 26544.46 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|--|---|--|---|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 74 OF 78 | | | |
| | <input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a | <input type="checkbox"/> 18 <input type="checkbox"/> 20b | <input type="checkbox"/> 19a <input type="checkbox"/> 20c | <input type="checkbox"/> 19b <input type="checkbox"/> 21 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Solutions Pacific | | Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2013 |
| Mailing Address 1042 Fort Street Mall Suite 200 | | Amount of Each Disbursement this Period 7329.84 Transaction ID : SB17.5764 |
| City Honolulu State HI Zip Code 96813 | Purpose of Disbursement Vendor - Fundraising and Communications Consulting Candidate Name Category/Type 001 | |
| Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Solutions Pacific | | Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2013 |
| Mailing Address 1042 Fort Street Mall Suite 200 | | Amount of Each Disbursement this Period 7329.84 Transaction ID : SB17.5735 |
| City Honolulu State HI Zip Code 96813 | Purpose of Disbursement Vendor - Fundraising and Communications Consulting Candidate Name Category/Type 001 | |
| Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) c. Solutions Pacific | | Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2013 |
| Mailing Address 1042 Fort Street Mall Suite 200 | | Amount of Each Disbursement this Period 7329.84 Transaction ID : SB17.5725 |
| City Honolulu State HI Zip Code 96813 | Purpose of Disbursement Vendor - Fundraising and Communications Consulting Candidate Name Category/Type 001 | |
| Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 21989.52 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 75 OF 78 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Rebecca Soon | | Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2013 |
| Mailing Address 39 Makaweli Street | | Amount of Each Disbursement this Period 386.99 |
| City Honolulu | State HI Zip Code 96825 | |
| Purpose of Disbursement Reimbursement - Whole Foods | Category/Type 007 | Transaction ID : SB17.5759 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Whole Foods | | Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2013 |
| Mailing Address 250 7th Ave | | Amount of Each Disbursement this Period 386.99 |
| City New York | State NY Zip Code 10001 | |
| Purpose of Disbursement Vendor - Food | Category/Type 007 | Transaction ID : SB17.5759.0 [MEMO ITEM] |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. The Charles Hotel | | Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2013 |
| Mailing Address One Bennett St. | | Amount of Each Disbursement this Period 1143.00 |
| City Cambridge | State MA Zip Code 02138 | |
| Purpose of Disbursement Vendor - Food and Beverages | Category/Type 007 | Transaction ID : SB17.5767 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 1529.99 |
| TOTAL This Period (last page this line number only)..... | |

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.5767

\$22.99 of this amount was refunded to us by The Charles Hotel on 11/17/13.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 77 OF 78 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. The Plaza Club | | Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2013 |
| Mailing Address 900 Fort Street Mall 20th and 21st Floors | | Amount of Each Disbursement this Period 739.49 Transaction ID : SB17.5703 |
| City Honolulu State HI Zip Code 96813 | Purpose of Disbursement Vendor - Food and Beverages Category/Type 007 | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Donald C. Weigel III | | Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013 |
| Mailing Address 1914 University Avenue #208 | | Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.5716 |
| City Honolulu State HI Zip Code 96822 | Purpose of Disbursement Vendor - Campaign Consulting Category/Type 001 | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. | | Date of Disbursement M M / D D / Y Y Y Y |
| Mailing Address | | Amount of Each Disbursement this Period |
| City State Zip Code | Purpose of Disbursement Category/Type | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 3239.49 |
| TOTAL This Period (last page this line number only)..... | 71066.70 |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|--|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 78 OF 78 | | | |
| | <input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21 | | | | |

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. James Wei | | Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2013 |
| Mailing Address 3133 Diamond Head Road | | Amount of Each Disbursement this Period 2000.00 Transaction ID : SB20A.5770 |
| City Honolulu State HI Zip Code 96815 | Purpose of Disbursement Refund of 09/30/13 Political Contribution Candidate Name Category/Type 010 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. | | Date of Disbursement M M / D D / Y Y Y Y |
| Mailing Address | | Amount of Each Disbursement this Period |
| City State Zip Code | Purpose of Disbursement Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. | | Date of Disbursement M M / D D / Y Y Y Y |
| Mailing Address | | Amount of Each Disbursement this Period |
| City State Zip Code | Purpose of Disbursement Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 2000.00 |
| TOTAL This Period (last page this line number only)..... | 2000.00 |