



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Hawaii Democratic Party**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="16222.97"/>	<input type="text" value="16222.97"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="61483.55"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="22687.54"/>	<input type="text" value="523045.23"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="84171.09"/>	<input type="text" value="539268.20"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="19853.15"/>	<input type="text" value="474950.26"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="64317.94"/>	<input type="text" value="64317.94"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="36513.84"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**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 3X (Rev. 06/2004)

Write or Type Committee Name

**Hawaii Democratic Party**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2100.00	83930.00
(ii) Unitemized .....	286.00	4026.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2386.00	87956.00
(b) Political Party Committees .....	4052.00	24312.00
(c) Other Political Committees (such as PACs).....	5000.00	160898.54
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	11438.00	273166.54
12. Transfers From Affiliated/Other Party Committees.....	7008.65	108559.39
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	222.68	30222.68
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.44	12014.28
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	4017.77	36360.91
(b) Levin Funds (from Schedule H5) .....	0.00	62721.43
(c) Total Transfers (add 18(a) and 18(b))..	4017.77	99082.34
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	22687.54	523045.23
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	18669.77	423962.89

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	1359.12	20308.59
(ii) Non-Federal Share.....	5112.89	58850.39
(b) Other Federal Operating Expenditures .....	10731.44	123683.05
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	17203.45	202842.03
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	500.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	500.00
29. Other Disbursements .....	325.00	325.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	488.19	19157.31
(ii) "Levin" Share.....	1836.51	72067.99
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	180057.93
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	2324.70	271283.23
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	19853.15	474950.26
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12903.75	344031.88

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	11438.00	273166.54
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	11438.00	272666.54
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	12090.56	143991.64
37. Offsets to Operating Expenditures (from Line 15, page 3).....	222.68	30222.68
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	11867.88	113768.96

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 28
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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)  
**Hawaii Democratic Party**

Full Name (Last, First, Middle Initial) <b>A. Charles Rettig</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 31 / 2014 <b>Transaction ID : C10158072A</b>
Mailing Address 9150 Wilshire Blvd Ste 300		Amount of Each Receipt this Period 2100.00
City Beverly Hills	State CA	Zip Code 90212-3430
FEC ID number of contributing federal political committee. <b>C</b>		* Earmarked Contribution: See Below
Name of Employer Hochman Salkin Rettig Toscher & Perez,	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2100.00	

Full Name (Last, First, Middle Initial) <b>B. ActBlue</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 26 / 2014 <b>Transaction ID : C10158072AB</b>
Mailing Address PO Box 382110		Amount of Each Receipt this Period 2100.00
City Cambridge	State MA	Zip Code 02238-2110
FEC ID number of contributing federal political committee. <b>C</b> C00401224		<b>[MEMO ITEM]</b> Note: Above Contribution earmarked through this organization.
Name of Employer	Occupation Conduit total listed in Agg. field	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2125.00	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State	Zip Code
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 28
<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Hawaii Democratic Party**

**A. Democratic National Committee**  
Full Name (Last, First, Middle Initial)  
Mailing Address 430 S Capitol St SE  
City Washington State DC Zip Code 20003-4024  
FEC ID number of contributing federal political committee. **C** C00010603  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 90181.73

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 / 30 / 2014  
**Transaction ID : C10139863**  
Amount of Each Receipt this Period  
2026.00  
\* In-Kind: On-line Voter File Access

**B. Democratic National Committee**  
Full Name (Last, First, Middle Initial)  
Mailing Address 430 S Capitol St SE  
City Washington State DC Zip Code 20003-4024  
FEC ID number of contributing federal political committee. **C** C00010603  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 90181.73

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 31 / 2014  
**Transaction ID : C10168366**  
Amount of Each Receipt this Period  
2026.00  
\* In-Kind: On-line Voter File Access

**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) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4052.00
<b>TOTAL</b> This Period (last page this line number only).....▶	4052.00

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

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

FOR LINE NUMBER: PAGE 8 OF 28  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Hawaii Democratic Party**

**A. National Postal Mail Handlers Union**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 905 16th St NW  
 FI 2  
 City Washington State DC Zip Code 20006-1703  
 FEC ID number of contributing federal political committee. **C** C00345306  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 26 / 2014  
**Transaction ID : C10158071**  
 Amount of Each Receipt this Period  
 5000.00

**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) ▼  
 Aggregate Year-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) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 28
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Hawaii Democratic Party**

**A. Democratic National Committee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 430 S Capitol St SE  
 City Washington State DC Zip Code 20003-4024  
 FEC ID number of contributing federal political committee. **C** C00010603  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 90181.73

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 17 / 2014  
**Transaction ID : C10168404**  
 Amount of Each Receipt this Period  
 2008.65

**B. Democratic National Committee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 430 S Capitol St SE  
 City Washington State DC Zip Code 20003-4024  
 FEC ID number of contributing federal political committee. **C** C00010603  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 90181.73

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 22 / 2014  
**Transaction ID : C10168367**  
 Amount of Each Receipt this Period  
 5000.00

**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) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7008.65
<b>TOTAL</b> This Period (last page this line number only).....▶	7008.65

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

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

FOR LINE NUMBER: PAGE 10 OF 28  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Hawaii Democratic Party**

Full Name (Last, First, Middle Initial)  
**A. Time Warner**

Mailing Address 200 Akamainui St

City Mililani State HI Zip Code 96789-3912

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 17 / 2014

**Transaction ID : C10168370**

Amount of Each Receipt this Period  
 222.68

Refund

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

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) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

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

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) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	222.68
<b>TOTAL</b> This Period (last page this line number only).....▶	222.68

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Hawaii Democratic Party**

Full Name (Last, First, Middle Initial)

### A. Cynthia Apana

Mailing Address 2222 Citron St

City Honolulu State HI Zip Code 96826-2855

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2014			

Transaction ID : D568180

Amount of Each Disbursement this Period

1	0	9	9	2	5
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Full Name (Last, First, Middle Initial)

### B. ActBlue Technical Services

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			17			2014			

Transaction ID : D569351

Amount of Each Disbursement this Period

0	9	9
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Full Name (Last, First, Middle Initial)

### C. Alex Wheeler

Mailing Address 1418 Liholiho St

City Honolulu State HI Zip Code 96822-4149

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			15			2014			

Transaction ID : D569343

Amount of Each Disbursement this Period

1	0	9	9	2	5
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

2	1	9	9	4	9
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2	1	9	9	4	9
---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Hawaii Democratic Party**

Full Name (Last, First, Middle Initial)

**A. Cynthia Apana**

Mailing Address 2222 Citron St

City Honolulu State HI Zip Code 96826-2855

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 28 / 2014

**Transaction ID : D567373**

Amount of Each Disbursement this Period

1099.25

Full Name (Last, First, Middle Initial)

**B. Cynthia Apana**

Mailing Address 2222 Citron St

City Honolulu State HI Zip Code 96826-2855

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 15 / 2014

**Transaction ID : D569344**

Amount of Each Disbursement this Period

1099.25

Full Name (Last, First, Middle Initial)

**C. Alex Wheeler**

Mailing Address 1418 Liholiho St

City Honolulu State HI Zip Code 96822-4149

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 28 / 2014

**Transaction ID : D567374**

Amount of Each Disbursement this Period

1099.25

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

3297.75

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)

**Hawaii Democratic Party**

Full Name (Last, First, Middle Initial)

**A. Democratic National Committee**

Mailing Address 430 S Capitol St SE

City Washington State DC Zip Code 20003-4024

Purpose of Disbursement  
On-line Voter File Access

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 30 / 2014

**Transaction ID : D567296**

Amount of Each Disbursement this Period

2026.00

\* In-Kind Received

Full Name (Last, First, Middle Initial)

**B. Democratic National Committee**

Mailing Address 430 S Capitol St SE

City Washington State DC Zip Code 20003-4024

Purpose of Disbursement  
On-line Voter File Access

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2014

**Transaction ID : D569347**

Amount of Each Disbursement this Period

2026.00

\* In-Kind Received

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 26 / 2014

**Transaction ID : D567377**

Amount of Each Disbursement this Period

82.95

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

4134.95

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**Hawaii Democratic Party**

Full Name (Last, First, Middle Initial)

### A. Alex Wheeler

Mailing Address 1418 Liholiho St

City Honolulu State HI Zip Code 96822-4149

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : D568179

Amount of Each Disbursement this Period

1099.25
---------

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

1099.25
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10731.44
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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**Hawaii Democratic Party**

Full Name (Last, First, Middle Initial)

### A. Federal Election Commission

Mailing Address PO Box 979058

City State Zip Code  
Saint Louis MO 63197-9000

Purpose of Disbursement  
Late Filing

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			04			2014			

Transaction ID : D569320

Amount of Each Disbursement this Period

325.00
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Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

325.00
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325.00
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**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **Hawaii Democratic Party** Transaction ID : L828

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Democratic National Committee	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 430 S Capitol St SE	
City Washington State DC ZIP Code 20003-4024	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
30000.00	14000.00	16000.00

**TERMS**

Date Incurred: MM / DD / YYYY  /  /  Date Due: MM / DD / YYYY  /  /  Interest Rate:  % (apr) Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional).....▶	16000.00
<b>TOTALS</b> This Period (last page in this line only).....▶	16000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 17 OF 28
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Hawaii Democratic Party**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Abercrombie For Governor</b>	Nature of Debt (Purpose): Rent and Utilities
Mailing Address 1050 Ala Moana Blvd Ste 2150	
City State Zip Code Honolulu HI 96814-4931	

Outstanding Balance Beginning This Period <input type="text" value="14787.42"/>	<b>Transaction ID : D511062</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="14787.42"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Department of the Treasury - IRS</b>	Nature of Debt (Purpose): Federal Taxes
Mailing Address PO Box 105083	
City State Zip Code Atlanta GA 30348-5083	

Outstanding Balance Beginning This Period <input type="text" value="5726.42"/>	<b>Transaction ID : D527886</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="5726.42"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="20513.84"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="20513.84"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text" value="16000.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="36513.84"/>

**SCHEDULE H3 (FEC Form 3X)  
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Hawaii Democratic Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
01076957	MM / DD / YYYY 12 / 18 / 2014	4017.77

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	4017.77
<b>Transaction ID : T3355</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	4017.77
<b>TOTAL</b> This Period (Generic Voter Drive) .....	0.00
<b>TOTAL</b> This Period (Exempt Activities) .....	0.00
<b>TOTAL</b> This Period (Direct Fundraising) .....	0.00
<b>TOTAL</b> This Period (Direct Candidate Support) .....	0.00
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	0.00
<b>TOTAL</b> This Period (Total Amount Transferred).....	4017.77

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Hawaii Democratic Party

Form A: Rainbow Printers, Inc. Transaction ID: D569335. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Banking Supplies), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (12/04/2014), and Amounts (FEDERAL SHARE: 91.26, NONFEDERAL SHARE: 343.29, TOTAL AMOUNT: 434.55).

Form B: Victoria Ward Limited Transaction ID: D569336. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Rent), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (12/05/2014), and Amounts (FEDERAL SHARE: 142.93, NONFEDERAL SHARE: 537.70, TOTAL AMOUNT: 680.63).

Form C: Hawaiian Telcom Transaction ID: D569339. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Telephone Service), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (12/05/2014), and Amounts (FEDERAL SHARE: 43.77, NONFEDERAL SHARE: 164.66, TOTAL AMOUNT: 208.43).

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE (277.96) + NONFEDERAL SHARE (1045.65) = TOTAL AMOUNT (1323.61)

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Hawaii Democratic Party

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : D569319</b> <b>Menehune Water Company, Inc</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 99-1205 Halawa Valley St		Allocated Activity or Event Year-To-Date 71814.07	
City State Zip Code Aiea HI 96701-3291	Category/Type 001	Date 12 / 04 / 2014	
Purpose of Disbursement: Water			
Activity or Event Identifier: Administrative			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
12.18 + 45.82 = 58.00			

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : D569317</b> <b>First Hawaiian Bank</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 999 Bishop St		Allocated Activity or Event Year-To-Date 71814.07	
City State Zip Code Honolulu HI 96813-4423	Category/Type	Date 12 / 01 / 2014	
Purpose of Disbursement: Bank Fee			
Activity or Event Identifier: Administrative			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
3.18 + 11.97 = 15.15			

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : D569318</b> <b>First Hawaiian Bank</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 999 Bishop St		Allocated Activity or Event Year-To-Date 71814.07	
City State Zip Code Honolulu HI 96813-4423	Category/Type	Date 12 / 15 / 2014	
Purpose of Disbursement: Bank Fee			
Activity or Event Identifier: Administrative			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
11.87 + 44.63 = 56.50			

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.23		102.42		129.65

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**Hawaii Democratic Party**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Time Warner</b>		<b>Transaction ID : D569338</b>	<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 200 Akamainui St			Allocated Activity or Event Year-To-Date 71814.07	
City Mililani	State HI	Zip Code 96789-3912	Date 12 / 05 / 2014	
Purpose of Disbursement: Telecommunications		001		
Activity or Event Identifier: Administrative		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	
15.43			58.07	
		=	TOTAL AMOUNT	
			73.50	

<b>B. Full Name (Last, First, Middle Initial)</b> <b>NGP VAN</b>		<b>Transaction ID : D569337</b>	<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1101 15th St NW Ste 500			Allocated Activity or Event Year-To-Date 71814.07	
City Washington	State DC	Zip Code 20005-5006	Date 12 / 05 / 2014	
Purpose of Disbursement: Software		001		
Activity or Event Identifier: Administrative		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	
409.50			1540.50	
		=	TOTAL AMOUNT	
			1950.00	

<b>C. Full Name (Last, First, Middle Initial)</b> <b>De Lage Landen</b>		<b>Transaction ID : D569321</b>	<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 41602			Allocated Activity or Event Year-To-Date 71814.07	
City Philadelphia	State PA	Zip Code 19101	Date 12 / 04 / 2014	
Purpose of Disbursement: Office Equipment Rental		001		
Activity or Event Identifier: Administrative		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	
172.89			650.38	
		=	TOTAL AMOUNT	
			823.27	

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
597.82		2248.95		2846.77

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Hawaii Democratic Party

A. Full Name (Last, First, Middle Initial) <b>Florence Kong Kee</b>		Transaction ID : <b>D569322</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1206 Hala Dr			Allocated Activity or Event Year-To-Date 71814.07	
City Honolulu	State HI	Zip Code 96817-2022	Date 12 / 04 / 2014	
Purpose of Disbursement: Reimburse Office Supplies		001		
Activity or Event Identifier: Administrative		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	
76.66			288.38	
		=	TOTAL AMOUNT	
			365.04	

B. Full Name (Last, First, Middle Initial) <b>Office Product Warehouse</b>		Transaction ID : <b>D569323</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 450 Cooke St			Allocated Activity or Event Year-To-Date 71814.07	
City Honolulu	State HI	Zip Code 96813-5321	Date 12 / 04 / 2014	
Purpose of Disbursement: Office Supplies		001		
Activity or Event Identifier: Administrative		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	
50.39			189.56	
		=	TOTAL AMOUNT	
			239.95	

C. Full Name (Last, First, Middle Initial) <b>City Mill Co., Ltd.</b>		Transaction ID : <b>D569325</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 333 Keahole St			Allocated Activity or Event Year-To-Date 71814.07	
City Honolulu	State HI	Zip Code 96825-3406	Date 12 / 04 / 2014	
Purpose of Disbursement: Office Supplies		001		
Activity or Event Identifier: Administrative		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	
2.31			8.67	
		=	TOTAL AMOUNT	
			10.98	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
76.66		288.38		365.04

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Hawaii Democratic Party

Form A: Fisher Hawaii, Transaction ID: D569326. Allocated Activity or Event: Administrative. Purpose: Office Supplies. Date: 12/04/2014. Amounts: FEDERAL SHARE 0.35, NONFEDERAL SHARE 1.31, TOTAL AMOUNT 1.66.

Form B: Fisher Hawaii, Transaction ID: D569327. Allocated Activity or Event: Administrative. Purpose: Office Supplies. Date: 12/04/2014. Amounts: FEDERAL SHARE 0.67, NONFEDERAL SHARE 2.53, TOTAL AMOUNT 3.20.

Form C: Fisher Hawaii, Transaction ID: D569328. Allocated Activity or Event: Administrative. Purpose: Office Supplies. Date: 12/04/2014. Amounts: FEDERAL SHARE 0.89, NONFEDERAL SHARE 3.35, TOTAL AMOUNT 4.24.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: (empty), (empty), (empty).

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Hawaii Democratic Party

A. Full Name (Last, First, Middle Initial) <b>Aiea Copy Center</b>		Transaction ID : <b>D569329</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 99-115 Aiea Heights Dr			Allocated Activity or Event Year-To-Date 71814.07	
City Aiea	State HI	Zip Code 96701-3924	Date 12 / 04 / 2014	
Purpose of Disbursement: Office Supplies		001		
Activity or Event Identifier: <b>Administrative</b> [MEMO ITEM]		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	
18.14			68.24	
		=	TOTAL AMOUNT	
			86.38	

B. Full Name (Last, First, Middle Initial) <b>Office Max</b>		Transaction ID : <b>D569324</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 770 Ala Moana Blvd			Allocated Activity or Event Year-To-Date 71814.07	
City Honolulu	State HI	Zip Code 96813-5504	Date 12 / 04 / 2014	
Purpose of Disbursement: Office Supplies		001		
Activity or Event Identifier: Administrative [MEMO ITEM]		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	
1.36			5.13	
		=	TOTAL AMOUNT	
			6.49	

C. Full Name (Last, First, Middle Initial) <b>Alex Wheeler</b>		Transaction ID : <b>D569330</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1418 Liholiho St			Allocated Activity or Event Year-To-Date 71814.07	
City Honolulu	State HI	Zip Code 96822-4149	Date 12 / 04 / 2014	
Purpose of Disbursement: Reimburse Postage		001		
Activity or Event Identifier: Administrative		Category/ Type		
FEDERAL SHARE		+	NONFEDERAL SHARE	
12.05			45.35	
		=	TOTAL AMOUNT	
			57.40	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.05		45.35		57.40

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Hawaii Democratic Party

Form A: Full Name (Last, First, Middle Initial) USPS, Transaction ID : D569331, Allocated Activity or Event: Administrative, Date: 12/04/2014, Amounts: 1.76, 6.64, 8.40

Form B: Full Name (Last, First, Middle Initial) USPS, Transaction ID : D569332, Allocated Activity or Event: Administrative, Date: 12/04/2014, Amounts: 10.29, 38.71, 49.00

Form C: Full Name (Last, First, Middle Initial) Cynthia Apana, Transaction ID : D569333, Allocated Activity or Event: Administrative, Date: 12/04/2014, Amounts: 5.00, 18.82, 23.82

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 5.00, 18.82, 23.82

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: (empty), (empty), (empty)

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Hawaii Democratic Party

A. Full Name (Last, First, Middle Initial) <b>Fisher Hawaii</b>		Transaction ID : <b>D569334</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 450 Cooke St			Allocated Activity or Event Year-To-Date 71814.07	
City Honolulu	State HI	Zip Code 96813-5321	Date 12 / 04 / 2014	
Purpose of Disbursement: Office Supplies		Category/ Type	Date	
Activity or Event Identifier: <b>Administrative</b> [MEMO ITEM]			Date	
FEDERAL SHARE		+	NONFEDERAL SHARE	
5.00			18.82	
		=	TOTAL AMOUNT	
			23.82	

B. Full Name (Last, First, Middle Initial) <b>Stephanie Ohigashi</b>		Transaction ID : <b>D569340</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 179 Halenani Dr			Allocated Activity or Event Year-To-Date 71814.07	
City Wailuku	State HI	Zip Code 96793-2402	Date 12 / 05 / 2014	
Purpose of Disbursement: Reimbursement for Travel- Meeting		Category/ Type	Date	
Activity or Event Identifier: Administrative			Date	
FEDERAL SHARE		+	NONFEDERAL SHARE	
80.01			300.99	
		=	TOTAL AMOUNT	
			381.00	

C. Full Name (Last, First, Middle Initial) <b>Hawaiian Airlines</b>		Transaction ID : <b>D569341</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3375 Koapaka St Ste G350			Allocated Activity or Event Year-To-Date 71814.07	
City Honolulu	State HI	Zip Code 96819-1804	Date 12 / 05 / 2014	
Purpose of Disbursement: Travel		Category/ Type	Date	
Activity or Event Identifier: Administrative [MEMO ITEM]			Date	
FEDERAL SHARE		+	NONFEDERAL SHARE	
39.69			149.31	
		=	TOTAL AMOUNT	
			189.00	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
80.01		300.99		381.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Hawaii Democratic Party

Form A: Hawaiian Airlines. Transaction ID: D569342. Allocated Activity or Event: Administrative. Date: 12/05/2014. Total Amount: 192.00.

Form B: Maui County Democratic Party. Transaction ID: D569345. Allocated Activity or Event: Administrative. Date: 12/17/2014. Total Amount: 1344.72.

Form C: The Maui News. Transaction ID: D569346. Allocated Activity or Event: Administrative. Date: 12/17/2014. Total Amount: 1344.72.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 282.39, 1062.33, 1344.72.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 1359.12, 5112.89, 6472.01.

**SCHEDULE H6 (FEC Form 3X)  
DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS  
FOR ALLOCATED FEDERAL ELECTION ACTIVITY**  
(To be used by State, District and Local Party Committees Only)

NAME OF COMMITTEE (In Full)  
**Hawaii Democratic Party**

A. Full Name (Last, First, Middle Initial) / Full Organization Name <b>Angle Mastagni Mathews Political Strategies</b>			Type of Allocated Activity or Event: <input type="checkbox"/> Voter Registration <input checked="" type="checkbox"/> GOTV <input type="checkbox"/> Voter ID <input type="checkbox"/> Generic Campaign		
Transaction ID : <b>D567723H6</b>			Allocated Activity or Event Year-To-Date <b>4585.09</b>		
Mailing Address 507 N Sylvania Ave			Date <b>12 / 17 / 2014</b>		
City Fort Worth	State TX	Zip Code 76111-2317	Category/ Type		
Purpose of Disbursement GOTV Phone Calls			Date		
FEDERAL SHARE		+	LEVIN SHARE		= TOTAL AMOUNT
<b>488.19</b>			<b>1836.51</b>		<b>2324.70</b>

B. Full Name (Last, First, Middle Initial) / Full Organization Name			Type of Allocated Activity or Event: <input type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV <input type="checkbox"/> Voter ID <input type="checkbox"/> Generic Campaign		
Mailing Address			Allocated Activity or Event Year-To-Date		
City	State	Zip Code	Date		
Purpose of Disbursement			Date		
FEDERAL SHARE		+	LEVIN SHARE		= TOTAL AMOUNT

C. Full Name (Last, First, Middle Initial) / Full Organization Name			Type of Allocated Activity or Event: <input type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV <input type="checkbox"/> Voter ID <input type="checkbox"/> Generic Campaign		
Mailing Address			Allocated Activity or Event Year-To-Date		
City	State	Zip Code	Date		
Purpose of Disbursement			Date		
FEDERAL SHARE		+	LEVIN SHARE		= TOTAL AMOUNT

<b>SUBTOTAL</b> of Shared Federal and Levin Activity This Page					
FEDERAL SHARE		+	LEVIN SHARE		= TOTAL AMOUNT
<b>488.19</b>			<b>1836.51</b>		<b>2324.70</b>
<b>TOTAL</b> This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))					
FEDERAL SHARE			LEVIN SHARE		TOTAL AMOUNT
<b>488.19</b>					<b>2324.70</b>
<b>TOTAL</b> This Period for the Levin Share					
			<b>1836.51</b>		