

# 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 MM / DD / YYYY in the State of

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

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

Election on MM / DD / YYYY in the State of

5. Covering Period

MM / DD / YYYY 04 / 01 / 2014

through

MM / DD / YYYY 06 / 30 / 2014

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 Mr. Nathan Okubo

Signature of Treasurer Mr. Nathan Okubo

[Electronically Filed]

Date

MM / DD / YYYY 07 / 15 / 2014

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								
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**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 167

Write or Type Committee Name

**Stanley Chang for Congress**

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

	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))....	145025.17	702747.94
(b) Total Contribution Refunds (from Line 20(d)) .....	100.00	3300.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	144925.17	699447.94
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	303421.15	523727.68
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	25.49
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	303421.15	523702.19
8. Cash on Hand at Close of Reporting Period (from Line 27).....	172716.64	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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).....	123585.99	641715.48
(ii) Unitemized.....	15939.18	48832.46
(iii) TOTAL of contributions from individuals ▶	139525.17	690547.94
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	5500.00	12200.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	145025.17	702747.94
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.) .....	0.00	25.49
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)..... ▶	145025.17	702773.43

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	303421.15	523727.68
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 .....	100.00	3300.00
(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)).....	100.00	3300.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	303521.15	527027.68

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	331212.62
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	145025.17
25. SUBTOTAL (add Line 23 and Line 24).....	476237.79
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	303521.15
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	172716.64

**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 167
	<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)  
**Darwin V. Abenoja**

Mailing Address 738 Kaheka St  
Ste 201

City Honolulu State HI Zip Code 96814-3726

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

Name of Employer Signature Cab Holdings, Inc. Occupation Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8NRCRT4D3**

Amount of Each Receipt this Period  
 2600.00

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

Mailing Address 1001 Bishop St  
Ste 1800

City Honolulu State HI Zip Code 96813-3689

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

Name of Employer Alston Hunt Floyd & Ing Occupation Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : VN8NRCRG588**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 2115 Rocky Hill Pl

City Honolulu State HI Zip Code 96822-2166

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

Name of Employer Case Lombardi and Pettit Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 07 / 2014

**Transaction ID : VN8NRCM3NP0**

Amount of Each Receipt this Period  
 1000.00

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

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

4600.00

**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 167
	<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)  
**Daniel Arita**

Mailing Address 1144 Waianiani Pl

City Honolulu State HI Zip Code 96821-1223

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

Name of Employer DataHouse Inc. Occupation Management 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  
 06 / 30 / 2014

**Transaction ID : VN8NRCRSJ02**

Amount of Each Receipt this Period  
 200.00

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

Mailing Address 1745 Nalulu Pl

City Honolulu State HI Zip Code 96821-1338

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

Name of Employer Ayabe Chong Nishimoto Sia & Nakamura 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  
 06 / 30 / 2014

**Transaction ID : VN8NRCRSB25**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 4050 17th St Apt 5

City San Francisco State CA Zip Code 94114-4202

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

Name of Employer Stanford University Occupation Student

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 17 / 2014

**Transaction ID : VN8NRCQMEH6**

Amount of Each Receipt this Period  
 200.00

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

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

900.00

**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 167
	<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)  
**Antonio Baclig**

Mailing Address 4050 17th St  
Apt 5

City San Francisco State CA Zip Code 94114-4202

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

Name of Employer Occupation  
Stanford University Student

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 / 28 / 2014**

**Transaction ID : VN8NRCRK4P0**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 1099 Alakea St  
16th Floor, Alii Place

City Honolulu State HI Zip Code 96813

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

Name of Employer Occupation  
Bays Deaver Hiatt Lung & Rose 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  
**04 / 11 / 2014**

**Transaction ID : VN8NRCH2294**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 88 Leonard St  
Apt 608

City New York State NY Zip Code 10013-3495

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

Name of Employer Occupation  
Goldman Sachs Investment Banker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**850.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 / 16 / 2014**

**Transaction ID : VN8NRCQGTA4**

Amount of Each Receipt this Period  
**100.00**

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

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

**700.00**

**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 167
	<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)  
**Jeffrey L Berenberg**

Mailing Address 46-143 Nahiku PI

City Kaneohe State HI Zip Code 96744-3625

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

Name of Employer US Army Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8NRCRTQH5**

Amount of Each Receipt this Period  
350.00

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

Mailing Address 46-143 Nahiku PI

City Kaneohe State HI Zip Code 96744-3625

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

Name of Employer US Army Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8NRCRTQP4**

Amount of Each Receipt this Period  
150.00

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

Mailing Address 422 E 72nd St Apt 6R

City New York State NY Zip Code 10021-4616

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

Name of Employer JP Morgan Occupation Investment Advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 20 / 2014

**Transaction ID : VN8NRCQTDC1**

Amount of Each Receipt this Period  
250.00

**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 9 OF 167
	<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

City State Zip Code  
New York NY 10012-5318

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

Name of Employer Occupation  
Forum for the Future Sustainability Advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 20 / 2014

**Transaction ID : VN8NRCQT B44**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address 110 Pacific Ave  
Ste 350

City State Zip Code  
San Francisco CA 94111-1900

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  
750.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 29 / 2014

**Transaction ID : VN8NRCRMRV7**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1740 S Beretania St  
Apt 23

City State Zip Code  
Honolulu HI 96826-1125

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

Name of Employer Occupation  
Bank of Hawaii VP of International Banking

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 24 / 2014

**Transaction ID : VN8NRCR0009**

Amount of Each Receipt this Period  
200.00

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

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

3050.00

**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 167
	<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)  
**Nani Brown**

Mailing Address 45-1025 Kamau Pl  
# 15

City Kaneohe State HI Zip Code 96744-3355

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

Name of Employer Self Occupation Electrical Journeyman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 08 / 2014

**Transaction ID : VN8NRCNV4Q4**

Amount of Each Receipt this Period  
430.00

\* In-Kind: Office materials and repairs

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

Mailing Address 10114 Bridlevale Dr

City Los Angeles State CA Zip Code 90064-4612

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

Name of Employer Rocky mountain resources Occupation Venture capitalist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 14 / 2014

**Transaction ID : VN8NRCQEQD6**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 1071 Noio St

City Honolulu State HI Zip Code 96816-5116

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

Name of Employer Self Employed Occupation Realtor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 07 / 2014

**Transaction ID : VN8NRCM3NN2**

Amount of Each Receipt this Period  
200.00

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

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

1630.00

**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 167	
	<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) <b>A. Helena Cence</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 04 / 2014
Mailing Address 1071 Noio St		<b>Transaction ID : VN8NRCPEJB9</b>
City Honolulu	State HI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self Employed	Occupation Realtor	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) <b>B. Stephanie Chan</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 26 / 2014
Mailing Address PO Box 160946		<b>Transaction ID : VN8NRCRBSQ8</b>
City Honolulu	State HI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Prudential	Occupation Realtor	
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>C. Alec Chang</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2014
Mailing Address 67 India St Apt 8A		<b>Transaction ID : VN8NRCRP119</b>
City Brooklyn	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Skadden	Occupation lawyer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	850.00
<b>TOTAL</b> 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 12 OF 167
	<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)  
**Ker-Ming Chang**

Mailing Address 1288 Ala Moana Blvd  
12E

City Honolulu State HI Zip Code 96814-4206

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

Name of Employer Self Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 17 / 2014

**Transaction ID : VN8NRCMWPY3**

Amount of Each Receipt this Period  
 200.00

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

Mailing Address 1009 Kapiolani Blvd

City Honolulu State HI Zip Code 96814-2112

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

Name of Employer Chef Chai Occupation Chef

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : VN8NRCSBKX5**

Amount of Each Receipt this Period  
 2565.44

\* In-Kind: Donated food and drink for event

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

Mailing Address 590 Farrington Hwy  
Unit 210

City Kapolei State HI Zip Code 96707-2002

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

Name of Employer New York Life Insurance Company Occupation Senior Associate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 22 / 2014

**Transaction ID : VN8NRCKED46**

Amount of Each Receipt this Period  
 100.00

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

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

2865.44

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

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

FOR LINE NUMBER: PAGE 13 OF 167  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     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)  
**Floyd Chapman**

Mailing Address 590 Farrington Hwy  
Unit 210

City Kapolei State HI Zip Code 96707-2002

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

Name of Employer New York Life Insurance Company Occupation Senior Associate

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 22 / 2014

**Transaction ID : VN8NRCKEE98**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 637 Ulumaika St

City Honolulu State HI Zip Code 96816-5203

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  
 06 / 14 / 2014

**Transaction ID : VN8NRCPY9F7**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 637 Ulumaika St

City Honolulu State HI Zip Code 96816-5203

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  
 06 / 30 / 2014

**Transaction ID : VN8NRCSPDJ4**

Amount of Each Receipt this Period  
 900.00

**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 14 OF 167
	<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)  
**Claudine Cheng**

Mailing Address 100 The Embarcadero  
Ste 200

City San Francisco State CA Zip Code 94105-1283

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

Name of Employer Self Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 20 / 2014

**Transaction ID : VN8NRCQTAY7**

Amount of Each Receipt this Period  
 300.00

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

Mailing Address 1200 Queen Emma St  
Apt 3711

City Honolulu State HI Zip Code 96813-6323

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

Name of Employer Starn O'Toole Marcus & Fisher Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8NRCRTQN6**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Katherine Cheng-Arif**

Mailing Address 10934 Tulip Garden Ct

City Houston State TX Zip Code 77065-3229

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

Name of Employer Houston Event Planning Occupation EVP

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 21 / 2014

**Transaction ID : VN8NRCNGZS1**

Amount of Each Receipt this Period  
 500.00

**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 15 OF 167
	<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)  
**Chian Leng Chia**

Mailing Address PO Box 61455

City Honolulu State HI Zip Code 96839-1455

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

Name of Employer Retired 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  
 05 / 17 / 2014

**Transaction ID : VN8NRCMWF02**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address PO Box 61455

City Honolulu State HI Zip Code 96839-1455

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

Name of Employer Retired 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  
 06 / 03 / 2014

**Transaction ID : VN8NRCNVM57**

Amount of Each Receipt this Period  
 100.00

**C.** Full Name (Last, First, Middle Initial)  
**Steve Chi Kwang Chiang**

Mailing Address 3321 Garden Terrace Ln

City Hacienda Heights State CA Zip Code 91745-6245

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

Name of Employer Chinese L.A. Daily News Occupation Publisher

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2014

**Transaction ID : VN8NRCQTBX2**

Amount of Each Receipt this Period  
 500.00

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

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

700.00

**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 167
	<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)  
**Celia H.S. Ching**

Mailing Address 1619 Kanalui St

City Honolulu State HI Zip Code 96816-1816

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

Name of Employer Self 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  
**06 / 30 / 2014**

**Transaction ID : VN8NRCRTT98**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 91-1059 Paaoloulu Way

City Kapolei State HI Zip Code 96707-3101

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

Name of Employer Office of Hawaiian Affairs Occupation Public Policy Advocate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **421.23**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 30 / 2014**

**Transaction ID : VN8NRCNV4R2**

Amount of Each Receipt this Period  
**96.23**

\* In-Kind: Event - food

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

Mailing Address 91-1059 Paaoloulu Way

City Kapolei State HI Zip Code 96707-3101

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

Name of Employer Office of Hawaiian Affairs Occupation Public Policy Advocate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **471.23**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : VN8NRCRS5K5**

Amount of Each Receipt this Period  
**50.00**

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

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

**246.23**



**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 167
	<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)  
**Kin Ching**

Mailing Address 126 Queen St  
Ste 101

City Honolulu State HI Zip Code 96813-4411

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

Name of Employer MAKAI Occupation Regional Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8NRCSPDN7**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 1700 Palaa St

City Honolulu State HI Zip Code 96821-1342

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 24 / 2014

**Transaction ID : VN8NRCQZZZ1**

Amount of Each Receipt this Period  
 300.00

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

Mailing Address 1466 Kamole St

City Honolulu State HI Zip Code 96821-1422

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

Name of Employer Mele Associates, 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  
 06 / 26 / 2014

**Transaction ID : VN8NRCRC1W5**

Amount of Each Receipt this Period  
 500.00

**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 18 OF 167
	<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) <b>A. Calvert G Chipchase</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 05 / 2014	
Mailing Address 2020 Kamehameha Ave		<b>Transaction ID : VN8NRCJQ642</b>	
City Honolulu	State HI	Zip Code 96822-2101	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 100.00	
Name of Employer Cades Schutte LLP	Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00		

Full Name (Last, First, Middle Initial) <b>B. Dennis W. Chong Kee</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 13 / 2014	
Mailing Address 1810 Alaweo St		<b>Transaction ID : VN8NRCQDY83</b>	
City Honolulu	State HI	Zip Code 96821-1302	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 100.00	
Name of Employer Cades Schutte LLP	Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) <b>C. Edward Y.C Chun</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 11 / 2014	
Mailing Address 745 Fort Street Mall FI 9		<b>Transaction ID : VN8NRCH2203</b>	
City Honolulu	State HI	Zip Code 96813-3800	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer Chun Kerr	Occupation Senior Counsel		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> 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 19 OF 167
	<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)  
**Lowell KW Chun**

Mailing Address 1296 Kapiolani Blvd  
Apt 1907

City Honolulu State HI Zip Code 96814-2883

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

Name of Employer Self Occupation Consultant, Alt. Energy & Property Dev

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1335.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8NRCRR1C4**

Amount of Each Receipt this Period  
35.00

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

Mailing Address 2175 Ahaku Pl

City Honolulu State HI Zip Code 96821-1012

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

Name of Employer Elite Parking Occupation President & Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : VN8NRCH2NJ3**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 100 Oceangate  
Ste 1120

City Long Beach State CA Zip Code 90802-4348

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

Name of Employer HDR Engineering, Inc. Occupation 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  
 06 / 09 / 2014

**Transaction ID : VN8NRCPTZ70**

Amount of Each Receipt this Period  
250.00

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

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

785.00

**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 167
	<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)  
**Catherine Conrad**

Mailing Address 2955 Makalei Pl

City Honolulu State HI Zip Code 96815-4742

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

Name of Employer None Occupation N/A

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  
**06 / 30 / 2014**

**Transaction ID : VN8NRCRH9D4**

Amount of Each Receipt this Period  
**600.00**

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

Mailing Address 2455 Halekoa Dr

City Honolulu State HI Zip Code 96821-1039

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

Name of Employer University of Hawaii Occupation Astronomer

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  
**04 / 28 / 2014**

**Transaction ID : VN8NRCKW0P2**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 261 Madison Ave  
Fl 9

City New York State NY Zip Code 10016-2311

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

Name of Employer Kinnek Occupation Systems Engineer and Data Scientist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 11 / 2014**

**Transaction ID : VN8NRCQH737**

Amount of Each Receipt this Period  
**200.00**

**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)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 21 OF 167

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NAME OF COMMITTEE (In Full)  
**Stanley Chang for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John D'Amato**

Mailing Address 900 Fort Street Mall  
 Ste 1680

City Honolulu State HI Zip Code 96813-3716

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

Name of Employer D'Amato & Maloney, 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  
 06 / 24 / 2014

**Transaction ID : VN8NRCQZYZ3**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 60 Laiki Pl

City Kailua State HI Zip Code 96734-1905

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

Name of Employer James Campbell Company Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 24 / 2014

**Transaction ID : VN8NRCR1MJ8**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 975 Memorial Dr  
 Apt 807

City Cambridge State MA Zip Code 02138-5754

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

Name of Employer Harvard Management Company 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  
 06 / 25 / 2014

**Transaction ID : VN8NRCRA2D4**

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 22 OF 167
	<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)  
**Christopher M. Dawson**

Mailing Address 3375 Koapaka St  
Ste B200

City Honolulu State HI Zip Code 96819-1862

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

Name of Employer Dawson Group, Inc. Occupation 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  
 06 / 04 / 2014

**Transaction ID : VN8NRCPJZ4**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 745 Fort Street Mall  
Ph

City Honolulu State HI Zip Code 96813-3800

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

Name of Employer The Hawaii Group Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8NRCRTRD6**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1549 Ipukula St

City Honolulu State HI Zip Code 96821-1419

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

Name of Employer N/A Occupation not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
314.36

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2014

**Transaction ID : VN8NRCRMQB0**

Amount of Each Receipt this Period  
314.36

\* In-Kind: Event Food and Drink

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

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

1064.36

**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 167
	<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)  
**Concetta M. DiLeo**

Mailing Address 1549 Ipukula St

City Honolulu State HI Zip Code 96821-1419

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

Name of Employer N/A Occupation not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **474.36**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2014

**Transaction ID : VN8NRCRKYP6**

Amount of Each Receipt this Period  
**150.00**

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

Mailing Address 1549 Ipukula St

City Honolulu State HI Zip Code 96821-1419

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

Name of Employer N/A Occupation not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **474.36**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2014

**Transaction ID : VN8NRCRMPV3**

Amount of Each Receipt this Period  
**10.00**

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

Mailing Address 156 Prince St  
Apt 2A

City New York State NY Zip Code 10012-5319

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

Name of Employer Cover Occupation Tech

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 Y  
 06 / 20 / 2014

**Transaction ID : VN8NRCQTB52**

Amount of Each Receipt this Period  
**2350.00**

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

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

**2510.00**

**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 167
	<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)  
**Richard H. Egged Jr.**

Mailing Address 3307 Herbert St

City Honolulu State HI Zip Code 96815-3838

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

Name of Employer Waikiki Improvement Occupation 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  
**04 / 29 / 2014**

**Transaction ID : VN8NRCKPA29**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 2235 Oahu Ave

City Honolulu State HI Zip Code 96822-2210

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

Name of Employer Self Occupation Self

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **290.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 10 / 2014**

**Transaction ID : VN8NRCQ3FT6**

Amount of Each Receipt this Period  
**150.00**

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

Mailing Address 231 Beacon St Apt 2

City Boston State MA Zip Code 02116-1350

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

Name of Employer Harvard University Occupation Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 29 / 2014**

**Transaction ID : VN8NRCKCFY0**

Amount of Each Receipt this Period  
**300.00**

**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 25 OF 167
	<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)  
**Thomas B. Fargo**

Mailing Address 1050 Kaimoku Pl

City Honolulu State HI Zip Code 96821-1439

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

Name of Employer FARGO ASSOCIATES LLC Occupation CONSULTANT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
550.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 29 / 2014

**Transaction ID : VN8NRCRMD93**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 565 Kumukahi Pl

City Honolulu State HI Zip Code 96825-1105

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 18 / 2014

**Transaction ID : VN8NRCK86F0**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 3665 Diamond Head Cir

City Honolulu State HI Zip Code 96815-4430

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

Name of Employer Self-employed Occupation 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  
 04 / 11 / 2014

**Transaction ID : VN8NRCJEVR2**

Amount of Each Receipt this Period  
500.00

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

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

800.00

**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 26 OF 167
	<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)  
**Brendon Fleming**

Mailing Address 3133 Connecticut Ave NW  
Apt 422

City Washington State DC Zip Code 20008-5106

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

Name of Employer Gibson, Dunn & Crutcher LLP Occupation lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **270.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8NRCRNR2**

Amount of Each Receipt this Period  
**20.00**

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

Mailing Address 1215 Hunakai St  
Ste 205

City Honolulu State HI Zip Code 96816-4661

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

Name of Employer The Fong Piano Studio Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : VN8NRCNVNB7**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address 47-337 Inin Street

City Kaneohe State HI Zip Code 96744

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

Name of Employer Self Occupation Realtor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 11 / 2014

**Transaction ID : VN8NRCQ6KP7**

Amount of Each Receipt this Period  
**200.00**

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

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

**420.00**

**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 167
	<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)  
**Wesley F. Fong**

Mailing Address 1065 Kalikimaka St

City Honolulu State HI Zip Code 96817-1224

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

Name of Employer Retired Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 29 / 2014

**Transaction ID : VN8NRCRN324**

Amount of Each Receipt this Period  
 88.00

Amount of Each Receipt this Period  
 288.00

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

Mailing Address 120 N Robertson Blvd

City Los Angeles State CA Zip Code 90048-3115

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

Name of Employer The Decurion Corporation Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 22 / 2014

**Transaction ID : VN8NRCNHA07**

Amount of Each Receipt this Period  
 1000.00

Amount of Each Receipt this Period  
 1400.00

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

Mailing Address 240 W 10th St Apt 32

City New York State NY Zip Code 10014-2999

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

Name of Employer Prestige Occupation Finance

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8NRC3Q85**

Amount of Each Receipt this Period  
 400.00

Amount of Each Receipt this Period  
 1700.00

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

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

1488.00

**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 167
	<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)  
**Gary Furuta**

Mailing Address 333 Queen St  
Ste 700

City Honolulu State HI Zip Code 96813-4712

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

Name of Employer Self Occupation Development

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8NRCRSE63**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Makiko Gaines-Kuroda**

Mailing Address 95-1083 Kopalani St

City Mililani State HI Zip Code 96789-4850

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

Name of Employer HNOA 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  
 05 / 22 / 2014

**Transaction ID : VN8NRCN5YA3**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Makiko Gaines-Kuroda**

Mailing Address 95-1083 Kopalani St

City Mililani State HI Zip Code 96789-4850

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

Name of Employer HNOA 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  
 06 / 03 / 2014

**Transaction ID : VN8NRCNY2P4**

Amount of Each Receipt this Period  
 500.00

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

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

2500.00

**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 29 OF 167
	<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)  
**Cheng Gao**

Mailing Address 55 Hbs Mail Ctr  
500 Soldiers Field Road

City Boston State MA Zip Code 02163-7801

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

Name of Employer HBS Occupation Student

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
245.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 29 / 2014

**Transaction ID : VN8NRCRN6P9**

Amount of Each Receipt this Period  
10.00

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

Mailing Address 250 W 50th St  
Apt 27G

City New York State NY Zip Code 10019-6727

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  
4700.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8NRCRVG61**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 301 Main St

City San Francisco State CA Zip Code 94105-5043

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

Name of Employer FFL Partners 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  
 06 / 20 / 2014

**Transaction ID : VN8NRCQTAW1**

Amount of Each Receipt this Period  
300.00

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

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

410.00

**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)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 30 OF 167

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NAME OF COMMITTEE (In Full)  
**Stanley Chang for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Raymond A. Hafner IV**

Mailing Address 4400 Memorial Dr  
 Apt 2144

City Houston State TX Zip Code 77007-7385

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  
 550.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : VN8NRCRHYG1**

Amount of Each Receipt this Period  
 200.00

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

Mailing Address 2318 Hanakealoha Pl

City Honolulu State HI Zip Code 96816-3008

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : VN8NRCNVMY4**

Amount of Each Receipt this Period  
 200.00

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

Mailing Address 2 E 70th St  
 4A

City New York State NY Zip Code 10021-4953

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

Name of Employer Northstar Realty Finance Occupation Principal

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  
 06 / 19 / 2014

**Transaction ID : VN8NRCQTAT5**

Amount of Each Receipt this Period  
 1000.00

**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: PAGE 31 OF 167  
(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)  
**Martha Hamamoto**

Mailing Address 2 E 70th St  
4A

City New York State NY Zip Code 10021-4913

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

Name of Employer Self Occupation Housewife

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 19 / 2014

**Transaction ID : VN8NRCQTD4**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 495 Anolani St

City Honolulu State HI Zip Code 96821-2032

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

Name of Employer Leahi Hospital Occupation occupational therapist

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 19 / 2014

**Transaction ID : VN8NRCNBPP7**

Amount of Each Receipt this Period  
 300.00

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

Mailing Address 2085 Ala Wai Blvd  
Apt 73

City Honolulu State HI Zip Code 96815-2108

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 04 / 2014

**Transaction ID : VN8NRCPEJD5**

Amount of Each Receipt this Period  
 250.00

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

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

1550.00

**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 32 OF 167
	<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)  
**Michael Hernandez-Soria**

Mailing Address 2801 Coconut Ave  
Apt 7D

City Honolulu State HI Zip Code 96815-4732

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

Name of Employer Hawaiian Cool Water Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 02 / 2014

**Transaction ID : VN8NRCM9W77**

Amount of Each Receipt this Period  
 400.00

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

Mailing Address 1288 Ala Moana Blvd  
Apt 14D

City Honolulu State HI Zip Code 96814-4292

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

Name of Employer Heyer & Associates Occupation Broker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 01 / 2014

**Transaction ID : VN8NRCM7G17**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address PO Box 88298

City Honolulu State HI Zip Code 96830-8298

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

Name of Employer Self Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8NRCRSWH8**

Amount of Each Receipt this Period  
 600.00

**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 33 OF 167
	<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)  
**Audrey E. Hidano**

Mailing Address 1620 Hau St

City Honolulu State HI Zip Code 96817-4915

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

Name of Employer: Hidano Construction Occupation: Office Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1450.00

Date of Receipt: 06 / 30 / 2014

**Transaction ID : VN8NRCRG5F2**

Amount of Each Receipt this Period: 250.00

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

Mailing Address 1020 Green St Apt 713

City Honolulu State HI Zip Code 96822-3647

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

Name of Employer: hawaii department of education Occupation: education officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 05 / 07 / 2014

**Transaction ID : VN8NRCM3N97**

Amount of Each Receipt this Period: 250.00

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

Mailing Address PO Box 2930

City Aiea State HI Zip Code 96701-8430

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

Name of Employer: RM Towill Occupation: Civil Engineer / Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2000.00

Date of Receipt: 06 / 26 / 2014

**Transaction ID : VN8NRCRBT66**

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)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 34 OF 167

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NAME OF COMMITTEE (In Full)  
**Stanley Chang for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Douglas K.T. Ho**

Mailing Address 1268 Young St  
 Ste 302

City Honolulu State HI Zip Code 96814-1801

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

Name of Employer Self Occupation Self

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 04 / 2014

**Transaction ID : VN8NRCPJCM8**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Douglas K.T. Ho**

Mailing Address 1268 Young St  
 Ste 302

City Honolulu State HI Zip Code 96814-1801

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

Name of Employer Self Occupation Self

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8NRCRSBJ0**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Wallace M.H. Ho**

Mailing Address 98-380 Kamehameha Hwy

City Aiea State HI Zip Code 96701-4336

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

Name of Employer Wally Ho's Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 17 / 2014

**Transaction ID : VN8NRCMWFH6**

Amount of Each Receipt this Period  
 200.00

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

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

1200.00

**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 35 OF 167
	<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)  
**Shannon Honda**

Mailing Address 600 California St

City San Francisco State CA Zip Code 94108-2704

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

Name of Employer Intrax Occupation Account Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8NRCRSGE0**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 700 Richards St  
Apt 2009

City Honolulu State HI Zip Code 96813-4620

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

Name of Employer Techmana Occupation Chief Technology Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2014

**Transaction ID : VN8NRCQX4X1**

Amount of Each Receipt this Period  
 559.20

\* In-Kind: Event Food and Drink

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

Mailing Address 700 Richards St  
Apt 2009

City Honolulu State HI Zip Code 96813-4620

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

Name of Employer Techmana Occupation Chief Technology Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 24 / 2014

**Transaction ID : VN8NRCQX3X0**

Amount of Each Receipt this Period  
 500.00

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

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

1309.20

**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 167
	<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)  
**Jerone Hsu**

Mailing Address 310 Riverside Dr  
Apt 306

City New York State NY Zip Code 10025-4136

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

Name of Employer Kovida I.S. Occupation Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8NRCRTV26**

Amount of Each Receipt this Period  
**20.00**

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

Mailing Address 310 Riverside Dr  
Apt 306

City New York State NY Zip Code 10025-4136

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

Name of Employer Kovida I.S. Occupation Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8NRCRTV33**

Amount of Each Receipt this Period  
**230.00**

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

Mailing Address 1177 Queen St  
Apt 602

City Honolulu State HI Zip Code 96814-4140

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **100.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 17 / 2014

**Transaction ID : VN8NRCMWH07**

Amount of Each Receipt this Period  
**100.00**

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

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

**350.00**

**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 167
	<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)  
**Kathleen Hsuing**

Mailing Address 1177 Queen St  
Apt 602

City Honolulu State HI Zip Code 96814-4140

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : VN8NRCRBSN2**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Philip C.K. Hu**

Mailing Address 2800 Longley Way  
Ste 200

City Arcadia State CA Zip Code 91007-8535

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

Name of Employer Transpacific Financial Inc Occupation 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  
 06 / 13 / 2014

**Transaction ID : VN8NRCQD0D1**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Sarina L Y Hu**

Mailing Address 5729 Golden West Ave

City Temple City State CA Zip Code 91780-2504

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

Name of Employer ISIS Occupation 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  
 05 / 07 / 2014

**Transaction ID : VN8NRCM3P17**

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: PAGE 38 OF 167  
(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)  
**John Hui**

Mailing Address 1833 Kalakaua Ave

City Honolulu State HI Zip Code 96815-1512

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

Name of Employer Avanti Fashion Inc./ Hawaii Teo Chew A 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  
 05 / 17 / 2014

**Transaction ID : VN8NRCMWH7**

Amount of Each Receipt this Period  
 200.00

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

Mailing Address 677 Ahua St

City Honolulu State HI Zip Code 96819-2002

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

Name of Employer Grace Pacific Occupation Chairman and Chief Executive Officer

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : VN8NRCRBVJ4**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 2394 Aina Lani Way

City Honolulu State HI Zip Code 96822-2026

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

Name of Employer Marshall Realty Inc Occupation Owner

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : VN8NRCP4FM5**

Amount of Each Receipt this Period  
 250.00

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

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

1450.00

**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 167
	<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)  
**Robert K. Ichikawa**

Mailing Address 2222 Manoa Rd

City Honolulu State HI Zip Code 96822-2124

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

Name of Employer Kobayashi Sugita and Goda Occupation Partner/ 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  
 06 / 30 / 2014

**Transaction ID : VN8NRCS3BG3**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 3446 Kupaa Dr

City Honolulu State HI Zip Code 96816-2504

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

Name of Employer D. Suehiro Electric, Inc. Occupation Project Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
535.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8NRCS6D0**

Amount of Each Receipt this Period  
35.00

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

Mailing Address 1080 S Beretania St Apt 504

City Honolulu State HI Zip Code 96814-1447

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

Name of Employer Alston Hunt Floyd and Ing Occupation Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
451.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : VN8NRCNVM98**

Amount of Each Receipt this Period  
100.00

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

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

385.00

**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 40 OF 167
	<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 K. M. Ing**

Mailing Address 2447 Parker Pl

City Honolulu State HI Zip Code 96822-1972

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

Name of Employer Self Occupation Investor

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  
 06 / 27 / 2014

**Transaction ID : VN8NRCRG4M0**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 2141 Atherton Rd  
Apt A

City Honolulu State HI Zip Code 96822-2191

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

Name of Employer Ralph S Inouye LTD Occupation President/CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8NRCRH9H5**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 938 Luawai St

City Honolulu State HI Zip Code 96816-4656

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

Name of Employer Ralph S Inouye LTD Occupation Chairman of Board

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  
 06 / 30 / 2014

**Transaction ID : VN8NRCRH9F9**

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 41 OF 167
	<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)  
**Michael P. Irish**

Mailing Address 966 Robello Ln

City Honolulu State HI Zip Code 96817-4545

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

Name of Employer Halm's Enterprises Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **950.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : VN8NRCS6E56**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address 2445 Makiki Heights Dr Apt A

City Honolulu State HI Zip Code 96822-2538

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

Name of Employer University of Hawaii Occupation Lecturer

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  
**06 / 14 / 2014**

**Transaction ID : VN8NRCPNK74**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 1000 Bishop St Ste 1200

City Honolulu State HI Zip Code 96813-4298

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 **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 14 / 2014**

**Transaction ID : VN8NRCQEPM8**

Amount of Each Receipt this Period  
**200.00**

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

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

**900.00**

**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 167
	<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)  
**Deron Kamisato**

Mailing Address 323 Kupaua Pl

City Honolulu State HI Zip Code 96821-2153

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

Name of Employer: Olelo Community Media Occupation: Community Media Associate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 100.00

Date of Receipt: 06 / 29 / 2014

**Transaction ID : VN8NRCRKY28**

Amount of Each Receipt this Period: 100.00

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

Mailing Address 323 Kupaua Pl

City Honolulu State HI Zip Code 96821-2153

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

Name of Employer: Olelo Community Media Occupation: Community Media Associate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 200.00

Date of Receipt: 06 / 30 / 2014

**Transaction ID : VN8NRCRTW52**

Amount of Each Receipt this Period: 100.00

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

Mailing Address 5383 Kahalakuia St

City Honolulu State HI Zip Code 96821-1532

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: 2100.00

Date of Receipt: 05 / 14 / 2014

**Transaction ID : VN8NRCMZ1E5**

Amount of Each Receipt this Period: 100.00

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

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

300.00

**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 43 OF 167
	<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) <b>A. Paul Kang</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 14 / 2014	
Mailing Address 5383 Kahalakua St		<b>Transaction ID : VN8NRCQE0W5</b>	
City Honolulu State HI Zip Code 96821-1532	Amount of Each Receipt this Period _____ 100.00		
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period _____ 2200.00		
Name of Employer: Island Vintage Coffee Occupation: Owner	Election Cycle-to-Date _____ 2200.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>B. Paul Kang</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 5383 Kahalakua St		<b>Transaction ID : VN8NRCRTVG6</b>	
City Honolulu State HI Zip Code 96821-1532	Amount of Each Receipt this Period _____ 400.00		
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period _____ 2700.00		
Name of Employer: Island Vintage Coffee Occupation: Owner	Election Cycle-to-Date _____ 2700.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>C. Paul Kang</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 5383 Kahalakua St		<b>Transaction ID : VN8NRCRTVM8</b>	
City Honolulu State HI Zip Code 96821-1532	Amount of Each Receipt this Period _____ 100.00		
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period _____ 2700.00		
Name of Employer: Island Vintage Coffee Occupation: Owner	Election Cycle-to-Date _____ 2700.00		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 600.00
<b>TOTAL</b> 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: PAGE 44 OF 167  
(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)  
**Randall Kau**

Mailing Address 131 Riverside Dr  
# 9

City State Zip Code  
New York NY 10024-3713

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

Name of Employer Occupation  
XE LLC Self Employed

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1450.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 20 / 2014

**Transaction ID : VN8NRCQTB7**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 1090 Kaholo St

City State Zip Code  
Hilo HI 96720-3216

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

Name of Employer Occupation  
Touchdown Trucking Owner

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : VN8NRCH2MX9**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 72 Kalola Pl

City State Zip Code  
Kihei HI 96753-9066

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

Name of Employer Occupation  
Pacific Biodiesel Technologies, LLC Communications

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 29 / 2014

**Transaction ID : VN8NRCP4N91**

Amount of Each Receipt this Period  
1000.00

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

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

2500.00

**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 45 OF 167
	<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)  
**Kelly T.T. King**

Mailing Address 72 Kalola Pl

City State Zip Code  
Kihei HI 96753-9066

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

Name of Employer Occupation  
Pacific Biodiesel Technologies, LLC Communications

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8NRCRRB84**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 977 Kalapaki St

City State Zip Code  
Honolulu HI 96825-2707

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

Name of Employer Occupation  
retired retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 18 / 2014

**Transaction ID : VN8NRCQR249**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 1288 Ala Moana Blvd

City State Zip Code  
Honolulu HI 96814-4206

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

Name of Employer Occupation  
Blue Planet Software CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : VN8NRCRCAD5**

Amount of Each Receipt this Period  
250.00

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

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

800.00

**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)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 46 OF 167

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NAME OF COMMITTEE (In Full)  
**Stanley Chang for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Edward M Knox**

Mailing Address 41-858 Laumilo St

City Waimanalo State HI Zip Code 96795-1647

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

Name of Employer Hawaiian Electric Co. Occupation Strategic Planner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **770.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : VN8NRCRNGH1**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 41-858 Laumilo St

City Waimanalo State HI Zip Code 96795-1647

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

Name of Employer John M. Knox & Associates, Inc. Occupation Socioeconomic Research Consultant

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  
**05 / 07 / 2014**

**Transaction ID : VN8NRCM3NA5**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 98-351 Koauka Loop  
 Apt C1901

City Aiea State HI Zip Code 96701-4442

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

Name of Employer Phoenix V LLC Occupation Management

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  
**06 / 27 / 2014**

**Transaction ID : VN8NRCRFCV3**

Amount of Each Receipt this Period  
**100.00**

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

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

**850.00**

**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)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 47 OF 167

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NAME OF COMMITTEE (In Full)  
**Stanley Chang for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kenneth R. Kupchak**

Mailing Address 1003 Bishop St

City Honolulu State HI Zip Code 96813-6401

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

Name of Employer Damon Key Leong Kupchak Hastert Occupation Attorney at Law

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 07 / 2014

**Transaction ID : VN8NRCMF1N4**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 3818 Anuhea St

City Honolulu State HI Zip Code 96816-3804

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

Name of Employer Samkoo Pacific, LLC Occupation General Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : VN8NRCNY2R0**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 95-217 Polie Pl

City Mililani State HI Zip Code 96789-6549

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

Name of Employer R.M. Towill Corporation Occupation Civil Engineer / Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : VN8NRCRBT25**

Amount of Each Receipt this Period  
 1000.00

**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 48 OF 167
	<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)  
**Tim T. Law**

Mailing Address 91-1023 Kaikoele St

City Ewa Beach State HI Zip Code 96706-6027

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

Name of Employer Fat Law Farm Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 17 / 2014

**Transaction ID : VN8NRCMWP0**

Amount of Each Receipt this Period  
 200.00

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

Mailing Address 9415 Campus Point Dr

City La Jolla State CA Zip Code 92093-1350

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

Name of Employer UC San Diego Occupation MD

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 18 / 2014

**Transaction ID : VN8NRCN6472**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address PO Box 2638 Ste 1163

City Honolulu State HI Zip Code 96803-2638

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

Name of Employer Consultants Plus Occupation Development Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 01 / 2014

**Transaction ID : VN8NRCM7FH0**

Amount of Each Receipt this Period  
 200.00

**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 49 OF 167
	<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)  
**Martin Lee**

Mailing Address **PO Box 2638**  
**Ste 1163**

City **Honolulu** State **HI** Zip Code **96803-2638**

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

Name of Employer **Consultants Plus** Occupation **Development Consultant**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**400.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : VN8NRCRTDD4**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address **2747 Kalawao St**

City **Honolulu** State **HI** Zip Code **96822-1592**

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

Name of Employer **Royal Contracting Co., Ltd.** Occupation **Vice President & Contractor**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : VN8NRCRTPS7**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address **308 108th Ave NE**

City **Bellevue** State **WA** Zip Code **98004-5768**

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

Name of Employer **Pacific Medical Centers** Occupation **Dermatologist**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 22 / 2014**

**Transaction ID : VN8NRCNHCR0**

Amount of Each Receipt this Period  
**500.00**

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

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

**1200.00**

**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 167
	<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)  
**Susan Leu**

Mailing Address 308 108th Ave NE

City Bellevue State WA Zip Code 98004-5768

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

Name of Employer Pacific Medical Centers Occupation Dermatologist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 24 / 2014

**Transaction ID : VN8NRCR26G0**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 12133 N Willow Ave

City Clovis State CA Zip Code 93619-9181

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 24 / 2014

**Transaction ID : VN8NRCR26H8**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 1052 Kahului St

City Honolulu State HI Zip Code 96825-2920

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

Name of Employer B&C Trucking Occupation VP

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : VN8NRCH23Q5**

Amount of Each Receipt this Period  
500.00

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

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

1200.00

**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 167
	<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)  
**Steven H. Levinson**

Mailing Address 3430 Keahi Pl  
Apt F

City Honolulu State HI Zip Code 96822-1264

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  
1750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 21 / 2014

**Transaction ID : VN8NRCQYYW8**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 92-1219 Hulukoa Pl

City Kapolei State HI Zip Code 96707-1539

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

Name of Employer Platinum Marketing Group Occupation Marketing

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 29 / 2014

**Transaction ID : VN8NRCKMMZ1**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 1184 Hunakai St

City Honolulu State HI Zip Code 96816-4613

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : VN8NRCNVMB4**

Amount of Each Receipt this Period  
200.00

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

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

500.00

**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 52 OF 167
	<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) <b>A. Constance Liu</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 1478 Kinau St		<b>Transaction ID : VN8NRCSPDQ3</b>	
City Honolulu	State HI	Zip Code 96814-1311	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200.00	
Name of Employer None	Occupation Housewife		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1300.00		

Full Name (Last, First, Middle Initial) <b>B. Constance Liu</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 1478 Kinau St		<b>Transaction ID : VN8NRCSPDQ3</b>	
City Honolulu	State HI	Zip Code 96814-1311	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00	
Name of Employer None	Occupation Housewife		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1300.00		

Full Name (Last, First, Middle Initial) <b>C. Jeff Liu</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 13 / 2014	
Mailing Address 2833 Round Top Dr		<b>Transaction ID : VN8NRCMWPV9</b>	
City Honolulu	State HI	Zip Code 96822-2005	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00	
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 600.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1300.00
<b>TOTAL</b> 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 53 OF 167
	<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)  
**Jennifer J. Liu**

Mailing Address **PO Box 6074**

City **Kaneohe** State **HI** Zip Code **96744-9168**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 03 / 2014**

**Transaction ID : VN8NRCP7710**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address **826 Queen St**

City **Honolulu** State **HI** Zip Code **96813-5286**

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

Name of Employer **Best Aloha Partners, LLC** Occupation **President & Principal**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 26 / 2014**

**Transaction ID : VN8NRCRBSY3**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address **737 Bishop St  
Ste 2600**

City **Honolulu** State **HI** Zip Code **96813-3283**

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

Name of Employer **Case, Lombardi, and Pettit** Occupation **Director**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 21 / 2014**

**Transaction ID : VN8NRCK3PY4**

Amount of Each Receipt this Period  
**100.00**

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

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

**500.00**

**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 167
	<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)  
**Dennis Lombardi**

Mailing Address 737 Bishop St  
Ste 2600

City Honolulu State HI Zip Code 96813-3283

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

Name of Employer Case, Lombardi, and Pettit Occupation Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
700.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 22 / 2014

**Transaction ID : VN8NRCNHA15**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Ernest J.T. Loo**

Mailing Address 2026 Halekoa Dr

City Honolulu State HI Zip Code 96821-1033

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

Name of Employer Self Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 17 / 2014

**Transaction ID : VN8NRCMQ82**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 4460 Kilauea Ave

City Honolulu State HI Zip Code 96816-5115

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

Name of Employer None Occupation Student

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
577.13

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 28 / 2014

**Transaction ID : VN8NRCS7MS5**

Amount of Each Receipt this Period  
77.13

\* In-Kind: Office Supplies

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

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

377.13

**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 167
	<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)  
**Chanel Louie**

Mailing Address 4460 Kilauea Ave

City Honolulu State HI Zip Code 96816-5115

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

Name of Employer None Occupation Student

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **668.24**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 22 / 2014**

**Transaction ID : VN8NRC57MR8**

Amount of Each Receipt this Period  
**91.11**

\* In-Kind: Event Food

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

Mailing Address 4460 Kilauea Ave

City Honolulu State HI Zip Code 96816-5115

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

Name of Employer None 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  
**06 / 04 / 2014**

**Transaction ID : VN8NRCPEJ28**

Amount of Each Receipt this Period  
**900.00**

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

Mailing Address PO Box 700443

City Kapolei State HI Zip Code 96709-0443

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 07 / 2014**

**Transaction ID : VN8NRCM3NC1**

Amount of Each Receipt this Period  
**100.00**

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

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

**1091.11**

**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 167
	<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)  
**Flora Lu**

Mailing Address 2030 Fern St  
Apt A

City Honolulu State HI Zip Code 96826-4178

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

Name of Employer Self-Employed Occupation Designer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : VN8NRCNVMF6**

Amount of Each Receipt this Period  
100.00

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

Mailing Address PO Box 37573

City Honolulu State HI Zip Code 96837-0573

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

Name of Employer Dynamic Property Management Inc Occupation Realtor

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  
 06 / 03 / 2014

**Transaction ID : VN8NRCP77P6**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 3138 Waiialae Ave  
Apt 1009

City Honolulu State HI Zip Code 96816-1544

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

Name of Employer Hawaii National Bank Occupation 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  
 05 / 02 / 2014

**Transaction ID : VN8NRCM9WX9**

Amount of Each Receipt this Period  
500.00

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

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

700.00



**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)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 57 OF 167

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NAME OF COMMITTEE (In Full)  
**Stanley Chang for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Catherine W. L. Luke**

Mailing Address 45 N King St  
 Ste 600

City Honolulu State HI Zip Code 96817-5649

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

Name of Employer: KJL Management Services Occupation: Financial Services

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  
 06 / 10 / 2014

**Transaction ID : VN8NRCQ3H55**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 3060 Ualena St  
 Ste A

City Honolulu State HI Zip Code 96819-1971

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

Name of Employer: Aloha Gourmet Occupation: President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 150.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 07 / 2014

**Transaction ID : VN8NRCM3N56**

Amount of Each Receipt this Period  
 150.00

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

Mailing Address 3060 Ualena St  
 Ste A

City Honolulu State HI Zip Code 96819-1971

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

Name of Employer: Aloha Gourmet Occupation: 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  
 06 / 28 / 2014

**Transaction ID : VN8NRCRKQ80**

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 58 OF 167	
	<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)  
**Kehaulani Lum**

Mailing Address **PO Box 10367**

City **Honolulu** State **HI** Zip Code **96816-0367**

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

Name of Employer **Living Life Source Foundation** Occupation **Board Secretary/ Director of Community**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : VN8NRCRPNX4**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Leighton W. K. Lum**

Mailing Address **1556 Ala Mahamoe St**

City **Honolulu** State **HI** Zip Code **96819-1765**

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

Name of Employer **RM Towill** Occupation **Engineer**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 26 / 2014**

**Transaction ID : VN8NRCRBTG5**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address **105 W 29th St  
Apt 39E**

City **New York** State **NY** Zip Code **10001-5740**

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

Name of Employer **Malt Products** Occupation **Marketing**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 25 / 2014**

**Transaction ID : VN8NRCKPKJ3**

Amount of Each Receipt this Period  
**200.00**

**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 59 OF 167
	<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) <b>A. Mary Luther</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2014
Mailing Address 1535 Ipukula St		<b>Transaction ID : VN8NRCRKYR2</b>
City Honolulu	State HI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer RCUH	Occupation Research Analyst	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 200.00	

Full Name (Last, First, Middle Initial) <b>B. Christopher H. Mai</b>		Date of Receipt MM / DD / YYYY 06 / 27 / 2014
Mailing Address 93 Niuiki Cir		<b>Transaction ID : VN8NRCRJ1W2</b>
City Honolulu	State HI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer self	Occupation physician	
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>C. Richard Malins</b>		Date of Receipt MM / DD / YYYY 06 / 17 / 2014
Mailing Address 3539 17th St		<b>Transaction ID : VN8NRCQMN65</b>
City San Francisco	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Google	Occupation Head of Brand and Consumer Insights	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> 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 60 OF 167
	<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. Bruce Mann**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 24 Linnaean St  
 City Cambridge State MA Zip Code 02138-1611  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Harvard University Occupation professor  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 29 / 2014  
**Transaction ID : VN8NRCRMFD8**  
 Amount of Each Receipt this Period  
 500.00

**B. Colbert M. Matsumoto**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1766 Hanahanai Pl  
 City Honolulu State HI Zip Code 96821-1308  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Island Insurance Company, Ltd Occupation Executive  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 28 / 2014  
**Transaction ID : VN8NRCNY2Q2**  
 Amount of Each Receipt this Period  
 1000.00

**C. Aaron R. Miller**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1914 University Ave Apt 208  
 City Honolulu State HI Zip Code 96822-2473  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Stanley Chang for Congress Occupation Communications and Policy Director  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 301.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014  
**Transaction ID : VN8NRCNVMN3**  
 Amount of Each Receipt this Period  
 100.00

**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 61 OF 167
	<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)  
**Colin O. Miwa**

Mailing Address **PO Box 939**

City **Honolulu** State **HI** Zip Code **96808-0939**

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 **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 25 / 2014**

**Transaction ID : VN8NRCR9BV5**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address **PO Box 939**

City **Honolulu** State **HI** Zip Code **96808-0939**

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 **700.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : VN8NRCRQWQ8**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address **243 W 70th St  
Apt 5D**

City **New York** State **NY** Zip Code **10023-4320**

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

Name of Employer **Seton Hall University** Occupation **History Professor**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 16 / 2014**

**Transaction ID : VN8NRCQGJR8**

Amount of Each Receipt this Period  
**100.00**

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

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

**400.00**

**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 62 OF 167
	<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)  
**John A. Morris**

Mailing Address 3761 Sierra Dr

City Honolulu State HI Zip Code 96816-3817

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

Name of Employer Ekimoto & Morris LLC Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 07 / 2014

**Transaction ID : VN8NRCME4T2**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 1288 Ala Moana Blvd Apt 11D

City Honolulu State HI Zip Code 96814-4292

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

Name of Employer Hawaii Gas Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 16 / 2014

**Transaction ID : VN8NRCQGZK7**

Amount of Each Receipt this Period  
 300.00

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

Mailing Address 247 E Washington St Apt 503

City Athens State GA Zip Code 30601-4528

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

Name of Employer Brooklyn Law School Occupation Assistant Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8NRCRR8N0**

Amount of Each Receipt this Period  
 550.00

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

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

1350.00

**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 63 OF 167
	<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)  
**Frances W Murata**

Mailing Address 1849 Laukahi St

City Honolulu State HI Zip Code 96821-1359

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

Name of Employer None Occupation N/A

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 24 / 2014**

**Transaction ID : VN8NRCR4FD3**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 3456 Pahoia Ave

City Honolulu State HI Zip Code 96816-2157

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

Name of Employer Pacific Shipyards International Occupation VP of Finance

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : VN8NRCRTTX6**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 2026 Aaniu Loop

City Pearl City State HI Zip Code 96782-1310

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 20 / 2014**

**Transaction ID : VN8NRCQT5Y8**

Amount of Each Receipt this Period  
**200.00**

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

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

**300.00**

**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 64 OF 167
	<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)  
**Ann Nishioka**

Mailing Address 4975 Kolohala St

City Honolulu	State HI	Zip Code 96816-5126
------------------	-------------	------------------------

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

Name of Employer N/A	Occupation Homemaker
-------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : VN8NRCRBV93**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 99-160 Waipao Pl

City Aiea	State HI	Zip Code 96701-3505
--------------	-------------	------------------------

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  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8NRCRSVN7**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 2174 Ahaku Pl

City Honolulu	State HI	Zip Code 96821-1013
------------------	-------------	------------------------

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

Name of Employer Alan N. Oki M.D. Inc	Occupation Construction Consultant
--	---------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 29 / 2014

**Transaction ID : VN8NRCKZ028**

Amount of Each Receipt this Period  
1000.00

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

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

2500.00



**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 65 OF 167
	<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)  
**Enid Okubo**

Mailing Address 99-025 Lauhulu St

City Aiea	State HI	Zip Code 96701-3459
--------------	-------------	------------------------

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

Name of Employer The Heights, Inc.	Occupation 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  
 06 / 30 / 2014

**Transaction ID : VN8NRCRSX56**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 99-025 Lauhulu St

City Aiea	State HI	Zip Code 96701-3459
--------------	-------------	------------------------

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

Name of Employer NAVFAC	Occupation Financial Analyst
----------------------------	---------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8NRCRSW12**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 99-128 Aiea Heights Dr  
Ste 101A

City Aiea	State HI	Zip Code 96701-3916
--------------	-------------	------------------------

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

Name of Employer Okubo & Associates	Occupation Insurance Agent
--	-------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1550.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2014

**Transaction ID : VN8NRCRJEQ1**

Amount of Each Receipt this Period  
300.00

**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 66 OF 167
	<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)  
**Nathan T. Okubo**

Mailing Address 600 Queen St  
Apt 1211

City Honolulu State HI Zip Code 96813-5194

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  
**2370.73**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 30 / 2014**

**Transaction ID : VN8NRCNV4S0**

Amount of Each Receipt this Period  
**96.23**

\* In-Kind: Event - food

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

Mailing Address 600 Queen St  
Apt 1211

City Honolulu State HI Zip Code 96813-5194

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  
**2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 29 / 2014**

**Transaction ID : VN8NRCRN6A4**

Amount of Each Receipt this Period  
**229.27**

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

Mailing Address 1361 Miloiki St

City Honolulu State HI Zip Code 96825-3224

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

Name of Employer Amazon Construction Co., Inc. Occupation Finance Executive

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  
**04 / 11 / 2014**

**Transaction ID : VN8NRCH24G3**

Amount of Each Receipt this Period  
**500.00**

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

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

**825.50**

**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 67 OF 167
	<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)  
**Duston K Onaga**

Mailing Address 1361 Miloiki St

City Honolulu State HI Zip Code 96825-3224

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

Name of Employer Amazon Construction Co., Inc. Occupation Finance Executive

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  
**06 / 30 / 2014**

**Transaction ID : VN8NRCRTPK0**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 855 Folsom St Apt 901

City San Francisco State CA Zip Code 94107-1186

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 **611.93**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 15 / 2014**

**Transaction ID : VN8NRCQEYF7**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 855 Folsom St Apt 901

City San Francisco State CA Zip Code 94107-1186

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 **711.93**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 29 / 2014**

**Transaction ID : VN8NRCRKY77**

Amount of Each Receipt this Period  
**100.00**

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

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

**700.00**

**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 68 OF 167
	<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) <b>A. Dwight S. Otani</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 26 / 2014
Mailing Address 2934 Pahoehoe Pl		<b>Transaction ID : VN8NRCRC137</b>
City Honolulu	State HI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer D Otani Produce Inc.	Occupation President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) <b>B. Jeffrey Overton</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2014
Mailing Address 3604 Anela Pl		<b>Transaction ID : VN8NRCRMPD3</b>
City Honolulu	State HI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Group 70 International, Inc.	Occupation Land Planner	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 800.00	

Full Name (Last, First, Middle Initial) <b>C. Laura E. Ozak</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 5230 Kuaiwi Pl		<b>Transaction ID : VN8NRCM3N80</b>
City Honolulu	State HI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self	Occupation Nurse Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	650.00
<b>TOTAL</b> 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 69 OF 167
	<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) <b>A. Jinha Park</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address 5825 Lincoln Ave Ste D330		<b>Transaction ID : VN8NRCK8323</b>
City Buena Park State CA Zip Code 90620-3463	Amount of Each Receipt this Period _____ 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period _____ 1000.00
Name of Employer City of Hope	Occupation Physician	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Jinha Park</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2014
Mailing Address 5825 Lincoln Ave Ste D330		<b>Transaction ID : VN8NRCQEXF4</b>
City Buena Park State CA Zip Code 90620-3463	Amount of Each Receipt this Period _____ 1600.00	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period _____ 3100.00
Name of Employer City of Hope	Occupation Physician	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 3100.00	

Full Name (Last, First, Middle Initial) <b>C. Jinha Park</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2014
Mailing Address 5825 Lincoln Ave Ste D330		<b>Transaction ID : VN8NRCQF289</b>
City Buena Park State CA Zip Code 90620-3463	Amount of Each Receipt this Period _____ 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period _____ 3100.00
Name of Employer City of Hope	Occupation Physician	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 3100.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 2600.00
<b>TOTAL</b> 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 70 OF 167
	<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) <b>A. Kuuhaku T. Park</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 09 / 2014	
Mailing Address PO Box 2912		<b>Transaction ID : VN8NRCJQ470</b>	
City Honolulu	State HI	Zip Code 96802-2912	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Matson	Occupation Admin		
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>B. Moon Soo Park</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2014	
Mailing Address 3101 Diamond Head Rd		<b>Transaction ID : VN8NRCRMT25</b>	
City Honolulu	State HI	Zip Code 96815-4719	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00	
Name of Employer Retired	Occupation Retired		
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>C. Sarah Park</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 222 Lincoln Pl Apt 3		<b>Transaction ID : VN8NRCRNXJ7</b>	
City Brooklyn	State NY	Zip Code 11217-3754	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer Venable LLP	Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 275.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1150.00
<b>TOTAL</b> 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 71 OF 167
	<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)  
**Richard Pentecost**

Mailing Address 935 Noio St

City Honolulu State HI Zip Code 96816-5229

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

Name of Employer Self Occupation Business owner and investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 11 / 2014

**Transaction ID : VN8NRCMRB6**

Amount of Each Receipt this Period  
**600.00**

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

Mailing Address 935 Noio St

City Honolulu State HI Zip Code 96816-5229

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

Name of Employer Self Occupation Business owner and investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 11 / 2014

**Transaction ID : VN8NRCMRC44**

Amount of Each Receipt this Period  
**400.00**

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

Mailing Address 1721 Iwi Way

City Honolulu State HI Zip Code 96816-3826

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

Name of Employer DRH Occupation PM

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 30 / 2014

**Transaction ID : VN8NRCP9K04**

Amount of Each Receipt this Period  
**200.00**

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

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

**1200.00**

**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 72 OF 167
	<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 Phillipson**

Mailing Address 2801 Coconut Ave  
Apt 4E

City Honolulu State HI Zip Code 96815-4752

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

Name of Employer Syngenta Hawaii Occupation Lead, Corporate Affairs

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 06 / 2014**

**Transaction ID : VN8NRCMF5H0**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 1121 Bethel St

City Honolulu State HI Zip Code 96813-2202

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

Name of Employer Soul de Cuba Franchise Company 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 Y Y  
**06 / 30 / 2014**

**Transaction ID : VN8NRCRTKC8**

Amount of Each Receipt this Period  
**500.00**

\* In-Kind: Event Food

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

Mailing Address 930 Tahoe Blvd  
Ste

City Incline Village State NV Zip Code 89451-9451

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

Name of Employer RKL Occupation Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 04 / 2014**

**Transaction ID : VN8NRCPEJC7**

Amount of Each Receipt this Period  
**200.00**

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

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

**800.00**



**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 73 OF 167
	<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 Robison**

Mailing Address 3207 Diamond Head Rd

City Honolulu State HI Zip Code 96815-4721

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  
 06 / 04 / 2014

**Transaction ID : VN8NRCPCZT9**

Amount of Each Receipt this Period  
 1500.00

2500.00

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

Mailing Address 3207 Diamond Head Rd

City Honolulu State HI Zip Code 96815-4721

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  
 06 / 20 / 2014

**Transaction ID : VN8NRCQGWS8**

Amount of Each Receipt this Period  
 100.00

5000.00

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

Mailing Address 3207 Diamond Head Rd

City Honolulu State HI Zip Code 96815-4721

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  
 06 / 20 / 2014

**Transaction ID : VN8NRCQGWW2**

Amount of Each Receipt this Period  
 2400.00

5000.00

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

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

4000.00

**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 74 OF 167
	<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)  
**Ronald Rodriguez**

Mailing Address 327 Dalene Way

City Honolulu State HI Zip Code 96821-2204

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

Name of Employer Hawaii Tourism Authority Occupation Contract Specialist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
51.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 07 / 2014

**Transaction ID : VN8NRCM3NQ8**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 327 Dalene Way

City Honolulu State HI Zip Code 96821-2204

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

Name of Employer Hawaii Tourism Authority Occupation Contract Specialist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
151.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 04 / 2014

**Transaction ID : VN8NRCPEJ85**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 327 Dalene Way

City Honolulu State HI Zip Code 96821-2204

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

Name of Employer Hawaii Tourism Authority Occupation Contract Specialist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
201.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8NRCRNDX0**

Amount of Each Receipt this Period  
50.00

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

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

200.00

**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 75 OF 167
	<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)  
**Timothy J. Roe**

Mailing Address 5571 Kalaniana'ole Hwy

City Honolulu State HI Zip Code 96821-2012

FEC ID number of contributing federal political committee.

Name of Employer: Rehabilitation Hospital of the Pacific  
Occupation: President & CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 22 / 2014

**Transaction ID : VN8NRCQZVP0**

Amount of Each Receipt this Period

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

Mailing Address 3087 La Pietra Cir

City Honolulu State HI Zip Code 96815-4736

FEC ID number of contributing federal political committee.

Name of Employer: Outrigger Enterprises, Inc.  
Occupation: VP, Community Relations

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8NRCRC1Z8**

Amount of Each Receipt this Period

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

Mailing Address 37171 Sycamore St  
Apt 420

City Newark State CA Zip Code 94560-3971

FEC ID number of contributing federal political committee.

Name of Employer: Palantir Technologies Inc.  
Occupation: Business Development Lead

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8NRCRNBM3**

Amount of Each Receipt this Period

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

**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 76 OF 167
	<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 M Sakurai**

Mailing Address 837 Waika Pl

City Honolulu State HI Zip Code 96825-1061

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

Name of Employer Coastal Construction Group 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  
 05 / 07 / 2014

**Transaction ID : VN8NRCMH9R2**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 9665 Wilshire Blvd  
FI 2

City Beverly Hills State CA Zip Code 90212-2340

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

Name of Employer Media Rights Capital Occupation 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  
 06 / 17 / 2014

**Transaction ID : VN8NRCQMM62**

Amount of Each Receipt this Period  
 600.00

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

Mailing Address 72 Makaweli St

City Honolulu State HI Zip Code 96825-2147

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

Name of Employer Gateside, Inc. Occupation Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : VN8NRCHA397**

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: (check only one)	PAGE 77 OF 167
	<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)  
**Alison B Schary**

Mailing Address 1451 Belmont St NW  
Apt 423

City Washington State DC Zip Code 20009-6625

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

Name of Employer Davis Wright Tremaine 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  
**04 / 07 / 2014**

**Transaction ID : VN8NRCJMCB3**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address 1440 New York Ave NW

City Washington State DC Zip Code 20005-2131

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

Name of Employer Skadden, Arps, Slate, Meagher & Flom Occupation Lawyer

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  
**06 / 30 / 2014**

**Transaction ID : VN8NRCRT8W1**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 500 N Lake Shore Dr  
Apt 3206

City Chicago State IL Zip Code 60611-5143

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

Name of Employer Sidley Austin 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  
**05 / 10 / 2014**

**Transaction ID : VN8NRCMQSY9**

Amount of Each Receipt this Period  
**250.00**

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

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

**700.00**

**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 78 OF 167
	<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 W. Settle**

Mailing Address 900 Fort Street Mall  
Ste 1800

City Honolulu State HI Zip Code 96813-3779

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

Name of Employer Settle Law Group, LLC Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 04 / 2014

**Transaction ID : VN8NRCPJCS7**

Amount of Each Receipt this Period  
850.00

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

Mailing Address 900 Fort Street Mall  
Ste 1800

City Honolulu State HI Zip Code 96813-3779

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

Name of Employer Settle Law Group, LLC Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 04 / 2014

**Transaction ID : VN8NRCPJCV3**

Amount of Each Receipt this Period  
150.00

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

Mailing Address 2450 Prince Edward St  
# 506A

City Honolulu State HI Zip Code 96815-3221

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

Name of Employer Chinese Community Broadcasting Occupation Journalist

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  
 05 / 26 / 2014

**Transaction ID : VN8NRCNVPE1**

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 79 OF 167
	<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)  
**GUOJUAN SHEN**

Mailing Address 2450 Prince Edward St  
# 506A

City Honolulu State HI Zip Code 96815-3221

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

Name of Employer Chinese Community Broadcasting Occupation Journalist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1120.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 04 / 2014**

**Transaction ID : VN8NRCPJ88**

Amount of Each Receipt this Period  
**20.00**

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

Mailing Address 2450 Prince Edward St  
# 506A

City Honolulu State HI Zip Code 96815-3221

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

Name of Employer Chinese Community Broadcasting Occupation Journalist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1140.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 10 / 2014**

**Transaction ID : VN8NRCQ1H42**

Amount of Each Receipt this Period  
**20.00**

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

Mailing Address 2450 Prince Edward St  
# 506A

City Honolulu State HI Zip Code 96815-3221

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

Name of Employer Chinese Community Broadcasting Occupation Journalist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1192.01**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 15 / 2014**

**Transaction ID : VN8NRCQF113**

Amount of Each Receipt this Period  
**52.01**

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

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

**92.01**

**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 80 OF 167
	<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)  
**GUOJUAN SHEN**

Mailing Address 2450 Prince Edward St  
# 506A

City Honolulu State HI Zip Code 96815-3221

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

Name of Employer Chinese Community Broadcasting Occupation Journalist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1444.02

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 20 / 2014

**Transaction ID : VN8NRCQW6X8**

Amount of Each Receipt this Period  
252.01

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

Mailing Address 2450 Prince Edward St  
# 506A

City Honolulu State HI Zip Code 96815-3221

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

Name of Employer Chinese Community Broadcasting Occupation Journalist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1464.02

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : VN8NRCRC6S1**

Amount of Each Receipt this Period  
20.00

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

Mailing Address 2450 Prince Edward St  
# 506A

City Honolulu State HI Zip Code 96815-3221

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

Name of Employer Chinese Community Broadcasting Occupation Journalist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2464.02

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8NRCRTVQ1**

Amount of Each Receipt this Period  
1000.00

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

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

1272.01



**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 81 OF 167
	<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)  
**Vincent R. Shigekuni**

Mailing Address 3138 Waiialae Ave  
Apt 1009

City Honolulu State HI Zip Code 96816-1544

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

Name of Employer PBR Hawaii Occupation Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 20 / 2014

**Transaction ID : VN8NRCQT1B9**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 87-2020 Farrington Hwy

City Waianae State HI Zip Code 96792-3749

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

Name of Employer PVT Land Co., Ltd. Occupation Owner/President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : VN8NRCHDW88**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 2317 Hoonanea St

City Honolulu State HI Zip Code 96822-2430

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 17 / 2014

**Transaction ID : VN8NRCMWF27**

Amount of Each Receipt this Period  
50.00

**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 82 OF 167
	<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)  
**Beverly P Smith**

Mailing Address 2317 Hoonanea St

City Honolulu State HI Zip Code 96822-2430

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **150.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 22 / 2014

**Transaction ID : VN8NRCNH9X3**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 2317 Hoonanea St

City Honolulu State HI Zip Code 96822-2430

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : VN8NRCP4NS6**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 2317 Hoonanea St

City Honolulu State HI Zip Code 96822-2430

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 04 / 2014

**Transaction ID : VN8NRCPEJA1**

Amount of Each Receipt this Period  
**50.00**

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

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

**200.00**

**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 83 OF 167
	<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)  
**Nicholas Smyth**

Mailing Address 1624 U St NW  
Apt 303

City Washington State DC Zip Code 20009-6206

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

Name of Employer CFPB Occupation Enforcement Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1005.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 21 / 2014**

**Transaction ID : VN8NRCKB0C9**

Amount of Each Receipt this Period  
**300.00**

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

Mailing Address 1624 U St NW  
Apt 303

City Washington State DC Zip Code 20009-6206

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

Name of Employer CFPB Occupation Enforcement Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1255.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : VN8NRCRR970**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 39 Makaweli St

City Honolulu State HI Zip Code 96825-2148

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

Name of Employer SSFM INTERNATIONAL Occupation DIRECTOR, PLANNING GROUP

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : VN8NRCsBN43**

Amount of Each Receipt this Period  
**500.00**

**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 84 OF 167
	<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)  
**Andrew Starn**

Mailing Address 1003 Bishop Sreet  
1800

City Honolulu State HI Zip Code 96813

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

Name of Employer Courtesy ATM Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : VN8NRCRSZ84**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 9 Sentry Pl  
Apt 2D

City Scarsdale State NY Zip Code 10583-2516

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

Name of Employer None Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 21 / 2014**

**Transaction ID : VN8NRCQZF27**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address 500 Ala Moana Blvd  
Apt 503

City Honolulu State HI Zip Code 96813-4920

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

Name of Employer McCorrison Miller Mukai Mackinnon Occupation Attorney

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  
**05 / 08 / 2014**

**Transaction ID : VN8NRCMMKD1**

Amount of Each Receipt this Period  
**100.00**

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

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

**400.00**

**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)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 85 OF 167

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NAME OF COMMITTEE (In Full)  
**Stanley Chang for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Max J. Sword**

Mailing Address PO Box 22782

City Honolulu State HI Zip Code 96823-2782

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

Name of Employer Outrigger Enterprises Inc Occupation Lobbyist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : VN8NRCPH1J1**

Amount of Each Receipt this Period  
 200.00

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

Mailing Address 725 Onaha St Ste 201

City Honolulu State HI Zip Code 96816-4920

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

Name of Employer Hawaii Lodging Occupation 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  
 06 / 10 / 2014

**Transaction ID : VN8NRCQ3FB7**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 1001 Bishop St Ste 770

City Honolulu State HI Zip Code 96813-3696

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

Name of Employer Tam and Stanford 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  
 06 / 26 / 2014

**Transaction ID : VN8NRCR9CC9**

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 86 OF 167
	<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)  
**Ryan A. Tam**

Mailing Address 1009 Kapiolani Blvd  
Apt 1110

City Honolulu State HI Zip Code 96814-2129

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

Name of Employer Honolulu Auth. Rapid Transportation Occupation Planner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : VN8NRCRQ9P0**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 2534 Halekoa Dr

City Honolulu State HI Zip Code 96821-1042

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

Name of Employer N/A Occupation Restaurateur

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1050.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 02 / 2014**

**Transaction ID : VN8NRCPEJ44**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 2534 Halekoa Dr

City Honolulu State HI Zip Code 96821-1042

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

Name of Employer N/A Occupation Restaurateur

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1150.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 04 / 2014**

**Transaction ID : VN8NRCPEJ36**

Amount of Each Receipt this Period  
**100.00**

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

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

**250.00**

**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 87 OF 167
	<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) <b>David K. Tanoue</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 26 / 2014
Mailing Address 600 Queen St Apt 2906		<b>Transaction ID : VN8NRCRBTX8</b>
City Honolulu	State HI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer RM Towill Corporation	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) <b>Unman Tay</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2014
Mailing Address 3615 Harding Ave Ste 303		<b>Transaction ID : VN8NRCMWJ07</b>
City Honolulu	State HI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer State Farm	Occupation Agent	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 200.00	

Full Name (Last, First, Middle Initial) <b>Casper Tolstrup</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 1816 Dole St		<b>Transaction ID : VN8NRCRSGK1</b>
City Honolulu	State HI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 350.00
Name of Employer None	Occupation Student	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1550.00
<b>TOTAL</b> 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 88 OF 167
	<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)  
**Joshua Tom**

Mailing Address 4 Times Sq

City State Zip Code  
New York NY 10036-6518

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

Name of Employer Occupation  
Skadden, Arps, Slate, Meagher & Flom Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 19 / 2014

**Transaction ID : VN8NRCQDPO**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 3147 Diamond Head Rd

City State Zip Code  
Honolulu HI 96815-4719

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8NRCRNWQ3**

Amount of Each Receipt this Period  
600.00

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

Mailing Address 1177 Queen St  
Apt 2002

City State Zip Code  
Honolulu HI 96814-4144

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 17 / 2014

**Transaction ID : VN8NRCMWPS4**

Amount of Each Receipt this Period  
100.00

**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 89 OF 167
	<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) <b>A. Carol Tsai</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2014	
Mailing Address 1177 Queen St Apt 2002		<b>Transaction ID : VN8NRCRMG82</b>	
City Honolulu State HI Zip Code 96814-4144	Amount of Each Receipt this Period _____ 20.00		
FEC ID number of contributing federal political committee. <b>C</b>	Name of Employer None Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 300.00		

Full Name (Last, First, Middle Initial) <b>B. Carol Tsai</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2014	
Mailing Address 1177 Queen St Apt 2002		<b>Transaction ID : VN8NRCRMGF7</b>	
City Honolulu State HI Zip Code 96814-4144	Amount of Each Receipt this Period _____ 180.00		
FEC ID number of contributing federal political committee. <b>C</b>	Name of Employer None Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Rocky Tsai</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 26 / 2014	
Mailing Address 3 Embarcadero Ctr		<b>Transaction ID : VN8NRCRCD25</b>	
City San Francisco State CA Zip Code 94111-4078	Amount of Each Receipt this Period _____ 300.00		
FEC ID number of contributing federal political committee. <b>C</b>	Name of Employer Ropes & Gray Occupation Lawyer		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 500.00
<b>TOTAL</b> 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 90 OF 167
	<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)  
**Alice Tucker**

Mailing Address 5273 Papai St

City Honolulu State HI Zip Code 96821-1943

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

Name of Employer Retired Occupation FORMER Dir., Volunteer Services, Rehab

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8NRCRKYW3**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Jennie Wen Chuan Wong Tung**

Mailing Address 500 University Ave Ph 1

City Honolulu State HI Zip Code 96826-4909

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 14 / 2014

**Transaction ID : VN8NRCPR4B8**

Amount of Each Receipt this Period  
**200.00**

**C.** Full Name (Last, First, Middle Initial)  
**Vaughn G. A. Vasconcellos**

Mailing Address 343 Hobron Ln Apt 3302

City Honolulu State HI Zip Code 96815-1098

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

Name of Employer Akimeka Occupation President and CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 07 / 2014

**Transaction ID : VN8NRCM2SM5**

Amount of Each Receipt this Period  
**2500.00**

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

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

**2800.00**

**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 91 OF 167
	<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)  
**Glenn G. Waki**

Mailing Address 2164 Okoa St

City Honolulu State HI Zip Code 96821-2644

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

Name of Employer Self employed Occupation Owner/Operator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 29 / 2014**

**Transaction ID : VN8NRCKTRW3**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 635 W 42nd St Apt 4K

City New York State NY Zip Code 10036-1919

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

Name of Employer CITAM Occupation PM

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 20 / 2014**

**Transaction ID : VN8NRCQJRW6**

Amount of Each Receipt this Period  
**200.00**

**C.** Full Name (Last, First, Middle Initial)  
**Yu-Chia Wang**

Mailing Address 92-242 Opuakii Pl

City Kapolei State HI Zip Code 96707-2518

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **100.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 03 / 2014**

**Transaction ID : VN8NRCNVMV0**

Amount of Each Receipt this Period  
**100.00**

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

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

**400.00**

**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 92 OF 167
	<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)  
**Yu-Chia Wang**

Mailing Address 92-242 Opuakii Pl

City Kapolei State HI Zip Code 96707-2518

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : VN8NRCRKYS9**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address 111 E 30th St  
Apy. 9BC

City New York State NY Zip Code 10016-7356

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

Name of Employer Columbia Unuversity Occupation Non-profit official

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 29 / 2014**

**Transaction ID : VN8NRCRN2P0**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 1441 Humuula St

City Kailua State HI Zip Code 96734-3709

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

Name of Employer Kawashima Waters & Lum LLLC 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  
**06 / 20 / 2014**

**Transaction ID : VN8NRCQGXD4**

Amount of Each Receipt this Period  
**250.00**

**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 93 OF 167
	<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)  
**Jaidev Watumull**

Mailing Address 307 Lewers St  
FI 6

City Honolulu State HI Zip Code 96815-2364

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

Name of Employer Watumull Properties Occupation VP

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : VN8NRCRC9S7**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 2325 Lime St  
Apt 1

City Honolulu State HI Zip Code 96826-4212

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

Name of Employer UH Manoa Law School Occupation Student

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **255.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : VN8NRCP4NT4**

Amount of Each Receipt this Period  
**150.00**

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

Mailing Address 2325 Lime St  
Apt 1

City Honolulu State HI Zip Code 96826-4212

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

Name of Employer UH Manoa Law School Occupation Student

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **305.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 29 / 2014

**Transaction ID : VN8NRCRKYK2**

Amount of Each Receipt this Period  
**50.00**

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

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

**450.00**

**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 94 OF 167	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Stanley Chang for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John P. Whalen**

Mailing Address 224A Huali St

City Honolulu State HI Zip Code 96813-1858

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

Name of Employer Semi-retired Occupation Urban Planner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 / 11 / 2014**

**Transaction ID : VN8NRCQ6JJ3**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 2226 Cooper Rd  
Apt A

City Honolulu State HI Zip Code 96822-1794

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

Name of Employer CW Associates Occupation CPA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 / 28 / 2014**

**Transaction ID : VN8NRCRKP6**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 1516 Kalaniiki St

City Honolulu State HI Zip Code 96821-1218

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

Name of Employer Alakona Corp. Occupation Owner/President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 / 10 / 2014**

**Transaction ID : VN8NRCQ25E4**

Amount of Each Receipt this Period  
**100.00**

**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 95 OF 167
	<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 Witt**

Mailing Address 1487 Hiikala Pl  
Apt 44

City Honolulu State HI Zip Code 96816-5633

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

Name of Employer Hawaii Assoc. of Independent Schools Occupation Executive Director

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  
 06 / 04 / 2014

**Transaction ID : VN8NRCPJG32**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 27207 Valderrama Dr

City Valencia State CA Zip Code 91381-0677

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

Name of Employer Irongate, LLC Occupation Finance

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  
 06 / 13 / 2014

**Transaction ID : VN8NRCQDKE6**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 2639 Kaaipu Ave

City Honolulu State HI Zip Code 96822-1613

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

Name of Employer Retired Occupation Retired

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  
 06 / 30 / 2014

**Transaction ID : VN8NRCRS173**

Amount of Each Receipt this Period  
200.00

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

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

2950.00

**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 96 OF 167
	<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)  
**Mark D. Wong**

Mailing Address **PO Box 1792**

City **Honolulu** State **HI** Zip Code **96806-1792**

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

Name of Employer **Commercial Data Systems** Occupation **Founder**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**400.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 24 / 2014**

**Transaction ID : VN8NRCQX3Z6**

Amount of Each Receipt this Period  
**400.00**

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

Mailing Address **300 S Raymond Ave Ste 9**

City **Pasadena** State **CA** Zip Code **91105-2639**

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

Name of Employer **Imprenta Communications** Occupation **President/ 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  
**06 / 20 / 2014**

**Transaction ID : VN8NRCQTB86**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address **1755 Halekoa Dr**

City **Honolulu** State **HI** Zip Code **96821-1026**

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

Name of Employer **Calvin Wong, M.D.** Occupation **Business Manager**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1450.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 07 / 2014**

**Transaction ID : VN8NRCM3ND9**

Amount of Each Receipt this Period  
**250.00**

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

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

**1150.00**



**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 97 OF 167
	<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)  
**Charles Woo**

Mailing Address 6443 E Slauson Ave

City Commerce State CA Zip Code 90040-3107

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

Name of Employer Mega Toys Occupation Chief Executive Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2014

**Transaction ID : VN8NRCQT6C7**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 641 Ulumaika St

City Honolulu State HI Zip Code 96816-5203

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

Name of Employer MW Group, Ltd. Occupation Commercial Real Estate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : VN8NRCRC3A6**

Amount of Each Receipt this Period  
 200.00

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

Mailing Address 46 Rivoli St

City San Francisco State CA Zip Code 94117-4327

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

Name of Employer Turn Inc. 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  
 06 / 17 / 2014

**Transaction ID : VN8NRCQMEZ6**

Amount of Each Receipt this Period  
 250.00

**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 98 OF 167
	<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)  
**Andrew Woods**

Mailing Address 46 Rivoli St

City San Francisco State CA Zip Code 94117-4327

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

Name of Employer Turn Inc. 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  
 06 / 30 / 2014

**Transaction ID : VN8NRCRNB70**

Amount of Each Receipt this Period  
 150.00

400.00

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

Mailing Address 101 W 24th St  
Apt 17B

City New York State NY Zip Code 10011-1967

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

Name of Employer Social Starts Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8NRCRSG83**

Amount of Each Receipt this Period  
 500.00

1400.00

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

Mailing Address 460 Walnut Ave

City Arcadia State CA Zip Code 91007-8336

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

Name of Employer Self Occupation Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2014

**Transaction ID : VN8NRCQTD97**

Amount of Each Receipt this Period  
 250.00

550.00

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

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

900.00

**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 99 OF 167
	<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)  
**Michael Wu**

Mailing Address 72 Prickly Pear

City Irvine State CA Zip Code 92618-8856

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

Name of Employer Little Sheep International Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 20 / 2014

**Transaction ID : VN8NRCQTC13**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 485 Puuikena Dr

City Honolulu State HI Zip Code 96821-2506

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

Name of Employer PVT Land Company 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  
 04 / 11 / 2014

**Transaction ID : VN8NRCHDWP8**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 485 Puuikena Dr

City Honolulu State HI Zip Code 96821-2506

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

Name of Employer PVT Land Company 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  
 06 / 14 / 2014

**Transaction ID : VN8NRCQ6D50**

Amount of Each Receipt this Period  
 1000.00

**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 100 OF 167
	<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)  
**James H. Yamamoto**

Mailing Address 3528 Kepuhi St

City Honolulu State HI Zip Code 96815-4366

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

Name of Employer R.M. Towill Corporation Occupation Civil Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 26 / 2014**

**Transaction ID : VN8NRCRBTM7**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address 612 Ahakea St  
Unit 240

City Honolulu State HI Zip Code 96816-4702

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 **2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 25 / 2014**

**Transaction ID : VN8NRCRA304**

Amount of Each Receipt this Period  
**2100.00**

\* In-Kind: Event Food and Drink

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

Mailing Address 46-176 Kalali Pl

City Kaneohe State HI Zip Code 96744-4126

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 03 / 2014**

**Transaction ID : VN8NRCNVSG3**

Amount of Each Receipt this Period  
**1500.00**

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

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

**4600.00**

**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 101 OF 167
	<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 Yee**

Mailing Address 1540 Lunar Dr

City Monterey Park State CA Zip Code 91754-4649

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

Name of Employer Imuarock Partners Occupation Business Consulting

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : VN8NRCRSYA7**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Jun-Chen Yen**

Mailing Address 90 N King St Ste 202

City Honolulu State HI Zip Code 96817-5111

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

Name of Employer HCN Occupation Media

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 17 / 2014

**Transaction ID : VN8NRCMWF A1**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 1000 Bishop St Ste 904

City Honolulu State HI Zip Code 96813-4209

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

Name of Employer University of Hawaii Occupation Principal Investigator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2014

**Transaction ID : VN8NRCRQS10**

Amount of Each Receipt this Period  
 1015.00

\* In-Kind: Office and Event Supplies

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

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

2115.00

**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 102 OF 167
	<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)  
**Darwin Yip**

Mailing Address 4 Longfellow Pl  
Apt 2411

City Boston State MA Zip Code 02114-2821

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

Name of Employer Massachusetts General Hospital Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2850.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 29 / 2014

**Transaction ID : VN8NRCKYZ83**

Amount of Each Receipt this Period  
1600.00

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

Mailing Address 4 Longfellow Pl  
Apt 2411

City Boston State MA Zip Code 02114-2821

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

Name of Employer Massachusetts General Hospital Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2850.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 29 / 2014

**Transaction ID : VN8NRCM2ZA9**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 10650 Kinnard Ave  
Apt 110

City Los Angeles State CA Zip Code 90024-5991

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

Name of Employer Stroock & Stroock & Lavan LLP 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  
 06 / 20 / 2014

**Transaction ID : VN8NRCQTBF1**

Amount of Each Receipt this Period  
250.00

**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: (check only one)	PAGE 103 OF 167
	<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) <b>Joseph W Young</b>		Date of Receipt MM / DD / YYYY 05 / 07 / 2014
Mailing Address 317 Nenuue St		<b>Transaction ID : VN8NRCM3N72</b>
City Honolulu	State HI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Retired	Occupation Retired	Election Cycle-to-Date 350.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Joseph W Young</b>		Date of Receipt MM / DD / YYYY 05 / 17 / 2014
Mailing Address 317 Nenuue St		<b>Transaction ID : VN8NRCMWFQ3</b>
City Honolulu	State HI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer Retired	Occupation Retired	Election Cycle-to-Date 950.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Stanley H Young</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2014
Mailing Address 4072 Puu Elelee Pl		<b>Transaction ID : VN8NRCRT594</b>
City Honolulu	State HI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Trans-Pacific Realty	Occupation Real Estate	Election Cycle-to-Date 1000.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1150.00
<b>TOTAL</b> 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 104 OF 167	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Stanley Chang for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Minhua Zhang**

Mailing Address 217 E 51st St

City State Zip Code  
New York NY 10022-6502

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

Name of Employer Occupation  
Cubist Systematic Strategies Analyst

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  
**06 / 20 / 2014**

**Transaction ID : VN8NRCQTBB0**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 6715 Rosemead Blvd

City State Zip Code  
San Gabriel CA 91775-1520

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

Name of Employer Occupation  
Oxbridgedu Zater 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  
**06 / 20 / 2014**

**Transaction ID : VN8NRCQTBS0**

Amount of Each Receipt this Period  
**500.00**

**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)

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).....

**750.00**

**123585.99**



**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 105 OF 167
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" 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)  
CITIZENS FOR GLOBAL SOLUTIONS, INC. POLITICAL ACTION COMMITTEE -- GLOBAL SOLUTIONS PAC

Mailing Address 418 7th St SE  
418 7TH STREET SE

City Washington State DC Zip Code 20003-2707

FEC ID number of contributing federal political committee. **C** C00043992

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  
 05 / 22 / 2014

**Transaction ID : VN8NRCNH9P8**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 700 13th St NW  
Ste 600

City Washington State DC Zip Code 20005-3960

FEC ID number of contributing federal political committee. **C** C00457747

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  
 04 / 21 / 2014

**Transaction ID : VN8NRCJXV75**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**HILTON WORLDWIDE POLITICAL ACTION COMMITTEE**

Mailing Address 7930 Jones Branch Dr  
Ste 1100

City McLean State VA Zip Code 22102-3313

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  
 04 / 29 / 2014

**Transaction ID : VN8NRCM27Z3**

Amount of Each Receipt this Period  
 2500.00

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

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

4000.00

**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 106 OF 167
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" 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)  
PACIFIC CENTURY FINANCIAL CORPORATION SPECIAL POLITICAL EDUCATION COMMITTEE

Mailing Address PO Box 2900

City Honolulu State HI Zip Code 96846-0001

FEC ID number of contributing federal political committee. **C** C00025668

Name of Employer Occupation

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  
 06 / 30 / 2014

**Transaction ID : VN8NRCS3843**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
PROGRESSIVE ACTION POLITICAL ACTION COMMITTEE

Mailing Address PO Box 70980

City Washington State DC Zip Code 20024-0980

FEC ID number of contributing federal political committee. **C** C00513176

Name of Employer Occupation

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  
 06 / 14 / 2014

**Transaction ID : VN8NRCPY9H3**

Amount of Each Receipt this Period  
 1000.00

**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)

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).....

1500.00

5500.00

**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 107 OF 167	
	<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) <b>A. 1&amp;1 Internet Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 701 Lee Rd Ste 300		Amount of Each Disbursement this Period 32.98
City Chesterbrook	State PA Zip Code 19087-5612	
Purpose of Disbursement Website Maintenance	Category/Type 001	<b>Transaction ID : VN7PG9SCQB7</b>
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>B. 4InkJets</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 3700 Cover St		Amount of Each Disbursement this Period 511.43
City Long Beach	State CA Zip Code 90808-1782	
Purpose of Disbursement Office Supplies	Category/Type 001	<b>Transaction ID : VN7PG9S6M30</b>
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>c. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2014
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 0.39
City Somerville	State MA Zip Code 02144-3132	
Purpose of Disbursement Merchant Fees	Category/Type 003	<b>Transaction ID : VN7PG9SCPP3</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	544.80
<b>TOTAL</b> 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 108 OF 167	
	<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) <b>A. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2014
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 1.61 <b>Transaction ID : VN7PG9SCPQ1</b>
City Somerville	State MA	
Zip Code 02144-3132	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>B. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2014
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 33.18 <b>Transaction ID : VN7PG9SCPR7</b>
City Somerville	State MA	
Zip Code 02144-3132	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>c. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2014
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 4.85 <b>Transaction ID : VN7PG9SCPS5</b>
City Somerville	State MA	
Zip Code 02144-3132	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	39.64
<b>TOTAL</b> 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 109 OF 167	
	<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) <b>A. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2014
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 0.29 <b>Transaction ID : VN7PG9SCT3</b>
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Merchant Fees 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:	

Full Name (Last, First, Middle Initial) <b>B. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2014
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 3.89 <b>Transaction ID : VN7PG9SCPV1</b>
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Merchant Fees 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:	

Full Name (Last, First, Middle Initial) <b>c. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2014
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 5.85 <b>Transaction ID : VN7PG9SCPW9</b>
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Merchant Fees 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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10.03
<b>TOTAL</b> 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 110 OF 167			
	<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) <b>A. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2014
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 4.16 <b>Transaction ID : VN7PG9SCPX6</b>
City Somerville	State MA	
Zip Code 02144-3132	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>B. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 0.08 <b>Transaction ID : VN7PG9SCP Y4</b>
City Somerville	State MA	
Zip Code 02144-3132	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>c. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2014
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 1.43 <b>Transaction ID : VN7PG9SCPZ2</b>
City Somerville	State MA	
Zip Code 02144-3132	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5.67
<b>TOTAL</b> 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 111 OF 167			
	<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) <b>A. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2014
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 11.46 <b>Transaction ID : VN7PG9SCQ00</b>
City Somerville	State MA	
Zip Code 02144-3132	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>B. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2014
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 3.97 <b>Transaction ID : VN7PG9SCQ18</b>
City Somerville	State MA	
Zip Code 02144-3132	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>c. ActBlue</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 19.38 <b>Transaction ID : VN7PG9SJJG2</b>
City Somerville	State MA	
Zip Code 02144-3132	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	34.81
<b>TOTAL</b> 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 112 OF 167			
	<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) <b>A. Activate</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 941 Kentucky St		Amount of Each Disbursement this Period 650.00 <b>Transaction ID : VN7PG9SA4E4</b>
City Lawrence State KS Zip Code 66044-2823	Purpose of Disbursement Phones Candidate Name Category/Type 001	
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>B. Delta Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 1030 Delta Blvd		Amount of Each Disbursement this Period 532.70 <b>Transaction ID : VN7PG9SE507</b>
City Atlanta State GA Zip Code 30354-1989	Purpose of Disbursement Campaign Travel Candidate Name Category/Type 002	
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>c. Shayna Lonoae'a Alexander</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 758 Hoomoana St		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : VN7PG9SA3M9</b>
City Pearl City State HI Zip Code 96782-1619	Purpose of Disbursement Political Consulting Candidate Name Category/Type 001	
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2182.70
<b>TOTAL</b> 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 113 OF 167			
	<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) <b>A. Shayna Lonoae'a Alexander</b>			Date of Disbursement MM / DD / YYYY 06 / 13 / 2014	
Mailing Address 758 Hoomoana St			Amount of Each Disbursement this Period 1250.00	
City Pearl City	State HI	Zip Code 96782-1619	Transaction ID : VN7PG9SCP83	
Purpose of Disbursement Political 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) <b>B. Anthology Marketing Group</b>			Date of Disbursement MM / DD / YYYY 04 / 01 / 2014	
Mailing Address 1003 Bishop St			Amount of Each Disbursement this Period 22000.00	
City Honolulu	State HI	Zip Code 96813-6401	Transaction ID : VN7PG9S69E2	
Purpose of Disbursement Advertising and Communications Consulting		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:				

Full Name (Last, First, Middle Initial) <b>c. Anthology Marketing Group</b>			Date of Disbursement MM / DD / YYYY 04 / 29 / 2014	
Mailing Address 1003 Bishop St			Amount of Each Disbursement this Period 20000.00	
City Honolulu	State HI	Zip Code 96813-6401	Transaction ID : VN7PG9S6KX2	
Purpose of Disbursement Advertising		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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	43250.00
<b>TOTAL</b> 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 114 OF 167			
	<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) <b>A. Anthology Marketing Group</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2014
Mailing Address 1003 Bishop St		Amount of Each Disbursement this Period 27303.66 <b>Transaction ID : VN7PG9S6SA5</b>
City Honolulu State HI Zip Code 96813-6401	Purpose of Disbursement Advertising 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:		

Full Name (Last, First, Middle Initial) <b>B. Anthology Marketing Group</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address 1003 Bishop St		Amount of Each Disbursement this Period 18000.00 <b>Transaction ID : VN7PG9S6SV9</b>
City Honolulu State HI Zip Code 96813-6401	Purpose of Disbursement Advertising 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:		

Full Name (Last, First, Middle Initial) <b>c. Anthology Marketing Group</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 1003 Bishop St		Amount of Each Disbursement this Period 17000.00 <b>Transaction ID : VN7PG9SA437</b>
City Honolulu State HI Zip Code 96813-6401	Purpose of Disbursement Advertising 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	62303.66
<b>TOTAL</b> 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 115 OF 167	
	<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) <b>A. Anthology Marketing Group</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2014
Mailing Address 1003 Bishop St		Amount of Each Disbursement this Period 48000.00 <b>Transaction ID : VN7PG9SA3A0</b>
City Honolulu	State HI Zip Code 96813-6401	
Purpose of Disbursement Advertising	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:		

Full Name (Last, First, Middle Initial) <b>B. Clinton Attaway</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 1255 Nuuanu Ave Apt 713E		Amount of Each Disbursement this Period 550.00 <b>Transaction ID : VN7PG9S8BQ4</b>
City Honolulu	State HI Zip Code 96817-4004	
Purpose of Disbursement Political 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) <b>c. Clinton Attaway</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 1255 Nuuanu Ave Apt 713E		Amount of Each Disbursement this Period 380.00 <b>Transaction ID : VN7PG9SE3Y8</b>
City Honolulu	State HI Zip Code 96817-4004	
Purpose of Disbursement Political 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	48930.00
<b>TOTAL</b> 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 116 OF 167			
	<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) <b>A. Regina Bailey</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 150 Hamakua Drive #759		Amount of Each Disbursement this Period 50.00
City Honolulu	State HI Zip Code 96816	
Purpose of Disbursement Political Consulting	Category/Type 001	<b>Transaction ID : VN7PG9SCNV0</b>
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>B. Bryan Bell</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 1088 Bishop St		Amount of Each Disbursement this Period 540.00
City Honolulu	State HI Zip Code 96813-3113	
Purpose of Disbursement Political Consulting	Category/Type 001	<b>Transaction ID : VN7PG9S8BN8</b>
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>c. Demond L B Bell</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 1088 Bishop St		Amount of Each Disbursement this Period 600.00
City Honolulu	State HI Zip Code 96813-3113	
Purpose of Disbursement Political Consulting	Category/Type 001	<b>Transaction ID : VN7PG9SA343</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1190.00
<b>TOTAL</b> 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 117 OF 167	
	<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) <b>A. Nani Brown</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address 45-1025 Kamau Pl # 15		Amount of Each Disbursement this Period 430.00
City Kaneohe	State HI Zip Code 96744-3355	
Purpose of Disbursement Office materials and repairs	Candidate Name	Transaction ID : VN8NRCNV4Q4I
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	* In-Kind Received

Full Name (Last, First, Middle Initial) <b>B. Cavanah Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 1100 Alakea St Ste 2600		Amount of Each Disbursement this Period 885.10
City Honolulu	State HI Zip Code 96813-2848	
Purpose of Disbursement Insurance	Candidate Name	Transaction ID : VN7PG9S6M14
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>C. Central Pacific Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2014
Mailing Address 220 S King St		Amount of Each Disbursement this Period 3.50
City Honolulu	State HI Zip Code 96813-4595	
Purpose of Disbursement Banking Fee	Candidate Name	Transaction ID : VN7PG9SA3S8
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type 001	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1318.60
<b>TOTAL</b> 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 118 OF 167			
	<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) <b>A. Central Pacific Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 220 S King St		Amount of Each Disbursement this Period 19.75
City Honolulu	State HI Zip Code 96813-4595	
Purpose of Disbursement Banking Fee	Category/Type 001	<b>Transaction ID : VN7PG9SE4J6</b>
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>B. Stanley Chang</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address 637 Ulumaika St		Amount of Each Disbursement this Period 51.59
City Honolulu	State HI Zip Code 96816-5203	
Purpose of Disbursement Reimbursement - Food and Beverage	Category/Type 007	<b>Transaction ID : VN7PG9S9SZ5</b>
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>c. Tortilla Coast</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address 400 1st St SE		Amount of Each Disbursement this Period 51.49
City Washington	State DC Zip Code 20003-1826	
Purpose of Disbursement Event food and drink	Category/Type 007	<b>Transaction ID : VN7PG9SA2Y5</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	71.34
<b>TOTAL</b> 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 119 OF 167			
	<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) <b>A. Chai Chaowasaree</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address 1009 Kapiolani Blvd		Amount of Each Disbursement this Period 2565.44
City Honolulu	State HI Zip Code 96814-2112	
Purpose of Disbursement Donated food and drink for event		Transaction ID : VN8NRC <b>SBKX5I</b>
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)	* In-Kind Received
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Jonathan Ching</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 91-1059 Paaoloulu Way		Amount of Each Disbursement this Period 96.23
City Kapolei	State HI Zip Code 96707-3101	
Purpose of Disbursement Event - food		Transaction ID : VN8NRC <b>NV4R2I</b>
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)	* In-Kind Received
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. Christensen &amp; Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address 209 Pennsylvania Ave SE		Amount of Each Disbursement this Period 2000.00
City Washington	State DC Zip Code 20003-1107	
Purpose of Disbursement Fundraising Consulting		Transaction ID : VN7PG <b>9S6JA0</b>
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:	Category/Type 003	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4661.67
<b>TOTAL</b> 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 120 OF 167	
	<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) <b>A. Christensen &amp; Associates</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address 209 Pennsylvania Ave SE			Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : VN7PG9S6KM1</b>
City Washington	State DC	Zip Code 20003-1107	
Purpose of Disbursement Fundraising Consulting		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:	

Full Name (Last, First, Middle Initial) <b>B. Christensen &amp; Associates</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2014
Mailing Address 209 Pennsylvania Ave SE			Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : VN7PG9SA3P5</b>
City Washington	State DC	Zip Code 20003-1107	
Purpose of Disbursement Fundraising Consulting		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:	

Full Name (Last, First, Middle Initial) <b>c. Christensen &amp; Associates</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 209 Pennsylvania Ave SE			Amount of Each Disbursement this Period 1980.01 <b>Transaction ID : VN7PG9SCQ50</b>
City Washington	State DC	Zip Code 20003-1107	
Purpose of Disbursement Fundraising Consulting		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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5980.01
<b>TOTAL</b> 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 121 OF 167	
	<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) <b>A. Serene P Collins</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 95 Laiki Pl		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : VN7PG9SA384</b>
City Kailua	State HI	
Zip Code 96734-1906	Purpose of Disbursement Political 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) <b>B. Serene P Collins</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 95 Laiki Pl		Amount of Each Disbursement this Period 140.00 <b>Transaction ID : VN7PG9SE404</b>
City Kailua	State HI	
Zip Code 96734-1906	Purpose of Disbursement Political 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) <b>c. Marya Demitruk</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 2421 Ala Wai Blvd Apt 1202		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : VN7PG9SCQ42</b>
City Honolulu	State HI	
Zip Code 96815-3480	Purpose of Disbursement Political 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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	840.00
<b>TOTAL</b> 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 122 OF 167	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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**

Full Name (Last, First, Middle Initial) <b>A. Concetta M. DiLeo</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 28 / 2014</b>
Mailing Address 1549 Ipukula St		Amount of Each Disbursement this Period <b>314.36</b>
City Honolulu	State HI Zip Code 96821-1419	
Purpose of Disbursement Event Food and Drink	Category/Type	<b>Transaction ID : VN8NRCRMQB01</b>
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)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) <b>B. eFax</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 28 / 2014</b>
Mailing Address 6922 Hollywood Blvd FI 5		Amount of Each Disbursement this Period <b>16.95</b>
City Los Angeles	State CA Zip Code 90028-6125	
Purpose of Disbursement Online Fax Service	Category/Type <b>001</b>	<b>Transaction ID : VN7PG9S6KP7</b>
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>C. eFax</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 28 / 2014</b>
Mailing Address 6922 Hollywood Blvd FI 5		Amount of Each Disbursement this Period <b>16.95</b>
City Los Angeles	State CA Zip Code 90028-6125	
Purpose of Disbursement Online Fax Service	Category/Type <b>001</b>	<b>Transaction ID : VN7PG9S8BZ7</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>348.26</b>
<b>TOTAL</b> 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 123 OF 167			
	<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) <b>A. Kristine J.C. Espinoza</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 1571 Piikoi St Apt 1905		Amount of Each Disbursement this Period 360.00 <b>Transaction ID : VN7PG9SA376</b>
City Honolulu	State HI Zip Code 96822-6102	
Purpose of Disbursement Political 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) <b>B. Facebook, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 1601 Willow Rd		Amount of Each Disbursement this Period 630.72 <b>Transaction ID : VN7PG9S6J92</b>
City Menlo Park	State CA Zip Code 94025-1452	
Purpose of Disbursement Internet Advertising	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:		

Full Name (Last, First, Middle Initial) <b>c. Facebook, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 1601 Willow Rd		Amount of Each Disbursement this Period 613.81 <b>Transaction ID : VN7PG9S6RX2</b>
City Menlo Park	State CA Zip Code 94025-1452	
Purpose of Disbursement Internet Advertising	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1604.53
<b>TOTAL</b> 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 124 OF 167	
	<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) <b>A. Facebook, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 1601 Willow Rd		Amount of Each Disbursement this Period 750.85 <b>Transaction ID : VN7PG9S8J49</b>
City Menlo Park	State CA	
Zip Code 94025-1452	Purpose of Disbursement Internet Advertising	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:	

Full Name (Last, First, Middle Initial) <b>B. Facebook, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 1601 Willow Rd		Amount of Each Disbursement this Period 5.49 <b>Transaction ID : VN7PG9SA3K1</b>
City Menlo Park	State CA	
Zip Code 94025-1452	Purpose of Disbursement Internet Advertising	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:	

Full Name (Last, First, Middle Initial) <b>C. Kendra W. Ginn</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 1955 Kakela Dr Apt A		Amount of Each Disbursement this Period 290.00 <b>Transaction ID : VN7PG9SCLP75</b>
City Honolulu	State HI	
Zip Code 96822-2156	Purpose of Disbursement Political 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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1046.34
<b>TOTAL</b> 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 125 OF 167	
	<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) <b>A. Taeka Haraguchi</b>		Date of Disbursement MM / DD / YYYY 04 / 02 / 2014
Mailing Address 311 E 50th St Apt 2H		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : VN7PG9S6J68</b>
City New York	State NY	
Zip Code 10022-7937	Purpose of Disbursement Political 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) <b>B. Taeka Haraguchi</b>		Date of Disbursement MM / DD / YYYY 04 / 14 / 2014
Mailing Address 311 E 50th St Apt 2H		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : VN7PG9S6JD3</b>
City New York	State NY	
Zip Code 10022-7937	Purpose of Disbursement Political 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) <b>c. Taeka Haraguchi</b>		Date of Disbursement MM / DD / YYYY 04 / 29 / 2014
Mailing Address 311 E 50th St Apt 2H		Amount of Each Disbursement this Period 1250.00 <b>Transaction ID : VN7PG9S6KV7</b>
City New York	State NY	
Zip Code 10022-7937	Purpose of Disbursement Political 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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4250.00
<b>TOTAL</b> 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 126 OF 167	
	<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) <b>A. Taeka Haraguchi</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 311 E 50th St Apt 2H		Amount of Each Disbursement this Period 1250.00
City New York	State NY	
Zip Code 10022-7937	Purpose of Disbursement Political Consulting	<b>Transaction ID : VN7PG9S6SC1</b>
Candidate Name	001 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>B. Taeka Haraguchi</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 311 E 50th St Apt 2H		Amount of Each Disbursement this Period 1250.00
City New York	State NY	
Zip Code 10022-7937	Purpose of Disbursement Political Consulting	<b>Transaction ID : VN7PG9SA3N7</b>
Candidate Name	001 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>c. Taeka Haraguchi</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 311 E 50th St Apt 2H		Amount of Each Disbursement this Period 1250.00
City New York	State NY	
Zip Code 10022-7937	Purpose of Disbursement Political Consulting	<b>Transaction ID : VN7PG9SA327</b>
Candidate Name	001 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3750.00
<b>TOTAL</b> 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 127 OF 167	
	<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) <b>A. Harland Clarke Check Orders</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 10931 Laureate Dr		Amount of Each Disbursement this Period 25.85
City San Antonio State TX Zip Code 78249-3312	Purpose of Disbursement Checks	
Candidate Name	001 Category/Type	Transaction ID : VN7PG9S6S97
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>B. Claire Harris</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 1534 Magazine St Apt A3		Amount of Each Disbursement this Period 854.00
City Honolulu State HI Zip Code 96822-3788	Purpose of Disbursement Fundraising Consulting	
Candidate Name	001 Category/Type	Transaction ID : VN7PG9S6J84
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>c. Hawaii Chinese TV</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2014
Mailing Address 100 N Beretania St Ste 206		Amount of Each Disbursement this Period 2650.00
City Honolulu State HI Zip Code 96817-4709	Purpose of Disbursement Advertising	
Candidate Name	004 Category/Type	Transaction ID : VN7PG9SA350
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3529.85
<b>TOTAL</b> 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 128 OF 167			
	<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) <b>A. Hawaiian Electric</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2014
Mailing Address 900 Richards St		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : VN7PG9SCQJ2</b>
City Honolulu State HI Zip Code 96813-2956	Purpose of Disbursement Electricity Candidate Name Category/Type 001	
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>B. Hawaiian Telecom</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2014
Mailing Address 1177 Bishop St		Amount of Each Disbursement this Period 96.69 <b>Transaction ID : VN7PG9SA3R1</b>
City Honolulu State HI Zip Code 96813-2837	Purpose of Disbursement Internet/Phone Services Candidate Name Category/Type 001	
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>c. Jeffrey Hong</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 700 Richards St Apt 2009		Amount of Each Disbursement this Period 559.20 <b>Transaction ID : VN8NRCQX4X11</b>
City Honolulu State HI Zip Code 96813-4620	Purpose of Disbursement Event Food and Drink 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:	* In-Kind Received

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1155.89
<b>TOTAL</b> 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 129 OF 167			
	<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) <b>A. Jocelyn Indriss</b>		Date of Disbursement MM / DD / YYYY 06 / 13 / 2014
Mailing Address 1717 Alencastre St		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : VN7PG9SCP67</b>
City Honolulu	State HI Zip Code 96816-1942	
Purpose of Disbursement Political Consulting	001 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>B. Bryan M. Jackson</b>		Date of Disbursement MM / DD / YYYY 06 / 02 / 2014
Mailing Address 1946 Ala Moana Blvd Apt 324		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : VN7PG9S8BX1</b>
City Honolulu	State HI Zip Code 96815-1103	
Purpose of Disbursement Political Consulting	001 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>c. Bryan M. Jackson</b>		Date of Disbursement MM / DD / YYYY 06 / 13 / 2014
Mailing Address 1946 Ala Moana Blvd Apt 324		Amount of Each Disbursement this Period 450.00 <b>Transaction ID : VN7PG9SA2Z3</b>
City Honolulu	State HI Zip Code 96815-1103	
Purpose of Disbursement Political Consulting	001 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1750.00
<b>TOTAL</b> 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 130 OF 167	
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Stanley Chang for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jade Dynasty</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 1450 Ala Moana Blvd		Amount of Each Disbursement this Period 1500.00
City Honolulu	State HI Zip Code 96814-4604	
Purpose of Disbursement Event - Food and Venue Rental		<b>Transaction ID : VN7PG9S6S30</b>
Candidate Name		
Office Sought:	Disbursement For: 2014	Category/Type 007
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Breanna Landry</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 725 Kapiolani Blvd Apt 1003		Amount of Each Disbursement this Period 420.00
City Honolulu	State HI Zip Code 96813-6003	
Purpose of Disbursement Political Consulting		<b>Transaction ID : VN7PG9SA3J3</b>
Candidate Name		
Office Sought:	Disbursement For: 2014	Category/Type 001
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Chanel Louie</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 4460 Kilauea Ave		Amount of Each Disbursement this Period 77.13
City Honolulu	State HI Zip Code 96816-5115	
Purpose of Disbursement Office Supplies		<b>Transaction ID : VN8NRCS7MS5I</b>
Candidate Name		
Office Sought:	Disbursement For: 2014	Category/Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		* In-Kind Received

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1997.13
<b>TOTAL</b> 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 131 OF 167			
	<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) <b>A. Chanel Louie</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2014
Mailing Address 4460 Kilauea Ave		Amount of Each Disbursement this Period 91.11
City Honolulu	State HI Zip Code 96816-5115	
Purpose of Disbursement Event Food	Category/Type	Transaction ID : VN8NRC57MR8I
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)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Lawrence Maneafaiga-Cunningham</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 86-131 Kwame Road		Amount of Each Disbursement this Period 520.00
City Waianae	State HI Zip Code 96816	
Purpose of Disbursement Political Consulting	Category/Type 001	Transaction ID : VN7PG9S8BM0
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>C. Lawrence Maneafaiga-Cunningham</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 86-131 Kwame Road		Amount of Each Disbursement this Period 420.00
City Waianae	State HI Zip Code 96816	
Purpose of Disbursement Political Consulting	Category/Type 001	Transaction ID : VN7PG9SA335
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1031.11
<b>TOTAL</b> 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 132 OF 167			
	<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) <b>A. Manoa Marketplace, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 2851 E Manoa Rd		Amount of Each Disbursement this Period 3141.36 <b>Transaction ID : VN7PG9S6KZ8</b>
City Honolulu State HI Zip Code 96822-1858	Purpose of Disbursement Office Rent 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>B. Manoa Marketplace, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 2851 E Manoa Rd		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : VN7PG9S6M06</b>
City Honolulu State HI Zip Code 96822-1858	Purpose of Disbursement Office Security Deposit 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>c. Manoa Marketplace, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 2851 E Manoa Rd		Amount of Each Disbursement this Period 3141.36 <b>Transaction ID : VN7PG9S6KY0</b>
City Honolulu State HI Zip Code 96822-1858	Purpose of Disbursement Office Rent 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9282.72
<b>TOTAL</b> 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 133 OF 167			
	<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) <b>A. Manoa Marketplace, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 2851 E Manoa Rd			Amount of Each Disbursement this Period 3141.36 <b>Transaction ID : VN7PG9SA3Q3</b>
City Honolulu	State HI	Zip Code 96822-1858	
Purpose of Disbursement Office Rent		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) <b>B. Courtney Matsuki</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address 1539 Magazine St			Amount of Each Disbursement this Period 1038.24 <b>Transaction ID : VN7PG9S6KQ5</b>
City Honolulu	State HI	Zip Code 96822-3767	
Purpose of Disbursement Political 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) <b>c. Alina C Meltaus</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 708 Columbia Rd NW			Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : VN7PG9S6J42</b>
City Washington	State DC	Zip Code 20001-3802	
Purpose of Disbursement Political 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: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5179.60
<b>TOTAL</b> 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 134 OF 167			
	<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) <b>A. Alina C Meltaus</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 708 Columbia Rd NW		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : VN7PG9S6JC5</b>
City Washington State DC Zip Code 20001-3802	Purpose of Disbursement Political Consulting Candidate Name Category/Type 001	
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>B. Alina C Meltaus</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address 708 Columbia Rd NW		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : VN7PG9S6KT9</b>
City Washington State DC Zip Code 20001-3802	Purpose of Disbursement Political Consulting Candidate Name Category/Type 001	
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>c. Alina C Meltaus</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 708 Columbia Rd NW		Amount of Each Disbursement this Period 1750.00 <b>Transaction ID : VN7PG9S6SB3</b>
City Washington State DC Zip Code 20001-3802	Purpose of Disbursement Political Consulting Candidate Name Category/Type 001	
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3750.00
<b>TOTAL</b> 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 135 OF 167	
	<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) <b>A. Alina C Meltaus</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 708 Columbia Rd NW		Amount of Each Disbursement this Period 6241.00 <b>Transaction ID : VN7PG9SA495</b>
City Washington	State DC Zip Code 20001-3802	
Purpose of Disbursement Political Consulting	001 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>B. Alina C Meltaus</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 708 Columbia Rd NW		Amount of Each Disbursement this Period 1250.00 <b>Transaction ID : VN7PG9SCN22</b>
City Washington	State DC Zip Code 20001-3802	
Purpose of Disbursement Political Consulting	001 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>c. Aaron R. Miller</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 1914 University Ave Apt 208		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : VN7PG9S6J50</b>
City Honolulu	State HI Zip Code 96822-2473	
Purpose of Disbursement Political Consulting	001 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7991.00
<b>TOTAL</b> 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 136 OF 167	
	<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) <b>A. Aaron R. Miller</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 1914 University Ave Apt 208		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : VN7PG9S6JE1</b>
City Honolulu	State HI Zip Code 96822-2473	
Purpose of Disbursement Political Consulting	001 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>B. Aaron R. Miller</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address 1914 University Ave Apt 208		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : VN7PG9S6KW5</b>
City Honolulu	State HI Zip Code 96822-2473	
Purpose of Disbursement Political Consulting	001 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>C. Aaron R. Miller</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 1914 University Ave Apt 208		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : VN7PG9S6SJ8</b>
City Honolulu	State HI Zip Code 96822-2473	
Purpose of Disbursement Political Consulting	001 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3000.00
<b>TOTAL</b> 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 137 OF 167	
	<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) <b>A. Aaron R. Miller</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 1914 University Ave Apt 208		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : VN7PG9SA445</b>
City Honolulu	State HI Zip Code 96822-2473	
Purpose of Disbursement Political Consulting	001 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>B. Aaron R. Miller</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 1914 University Ave Apt 208		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : VN7PG9SCNG3</b>
City Honolulu	State HI Zip Code 96822-2473	
Purpose of Disbursement Political Consulting	001 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>c. Solomon Navarro</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 1419A Akiikii PI		Amount of Each Disbursement this Period 50.00 <b>Transaction ID : VN7PG9SCP90</b>
City Kailua	State HI Zip Code 96734-4285	
Purpose of Disbursement Political Consulting	001 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2050.00
<b>TOTAL</b> 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 138 OF 167			
	<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) <b>A. Net10 Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 9700 NW 112th Ave		Amount of Each Disbursement this Period 37.18 <b>Transaction ID : VN7PG9SA3W2</b>
City Medley State FL Zip Code 33178-1353	Purpose of Disbursement Phones 001 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>B. Net10 Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 9700 NW 112th Ave		Amount of Each Disbursement this Period 37.18 <b>Transaction ID : VN7PG9SA3Y8</b>
City Medley State FL Zip Code 33178-1353	Purpose of Disbursement Phones 001 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>C. Net10 Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 9700 NW 112th Ave		Amount of Each Disbursement this Period 37.18 <b>Transaction ID : VN7PG9SA3Z6</b>
City Medley State FL Zip Code 33178-1353	Purpose of Disbursement Phones 001 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	111.54
<b>TOTAL</b> 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 139 OF 167	
	<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) <b>A. Net10 Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 9700 NW 112th Ave		Amount of Each Disbursement this Period 37.18 <b>Transaction ID : VN7PG9SA412</b>
City Medley State FL Zip Code 33178-1353	Purpose of Disbursement Phones Candidate Name Category/Type 001	
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>B. Net10 Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 9700 NW 112th Ave		Amount of Each Disbursement this Period 37.18 <b>Transaction ID : VN7PG9SCQE1</b>
City Medley State FL Zip Code 33178-1353	Purpose of Disbursement Phones Candidate Name Category/Type 001	
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>C. Net10 Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 9700 NW 112th Ave		Amount of Each Disbursement this Period 37.18 <b>Transaction ID : VN7PG9SCQF9</b>
City Medley State FL Zip Code 33178-1353	Purpose of Disbursement Phones Candidate Name Category/Type 001	
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	111.54
<b>TOTAL</b> 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 140 OF 167	
	<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) <b>A. Net10 Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 9700 NW 112th Ave		Amount of Each Disbursement this Period 37.18 <b>Transaction ID : VN7PG9SCQG7</b>
City Medley State FL Zip Code 33178-1353	Purpose of Disbursement Phones 001 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>B. Net10 Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 9700 NW 112th Ave		Amount of Each Disbursement this Period 37.18 <b>Transaction ID : VN7PG9SCQH4</b>
City Medley State FL Zip Code 33178-1353	Purpose of Disbursement Phones 001 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>C. NGP VAN, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 8 Grove Street, Suite 202		Amount of Each Disbursement this Period 1146.96 <b>Transaction ID : VN7PG9SB8S7</b>
City Somerville State MA Zip Code 02144-2940	Purpose of Disbursement Merchant Fees 001 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1221.32
<b>TOTAL</b> 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 141 OF 167			
	<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) <b>A. NGP VAN, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 8 Grove Street, Suite 202		Amount of Each Disbursement this Period 450.00 <b>Transaction ID : VN7PG9S6RY0</b>
City Somerville State MA Zip Code 02144-2940	Purpose of Disbursement Database and Vendor Fee Candidate Name Category/Type 001	
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>B. NGP VAN, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 8 Grove Street, Suite 202		Amount of Each Disbursement this Period 1069.65 <b>Transaction ID : VN7PG9SE2B7</b>
City Somerville State MA Zip Code 02144-2940	Purpose of Disbursement Merchant Fees Candidate Name Category/Type 001	
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>C. NGP VAN, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 8 Grove Street, Suite 202		Amount of Each Disbursement this Period 329.90 <b>Transaction ID : VN7PG9SCQM8</b>
City Somerville State MA Zip Code 02144-2940	Purpose of Disbursement Merchant Fees Candidate Name Category/Type 001	
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1849.55
<b>TOTAL</b> 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 142 OF 167	
	<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) <b>A. Shane J K Nuuhiwa</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 3028 Makini St		Amount of Each Disbursement this Period 520.00 <b>Transaction ID : VN7PG9S8BR2</b>
City Honolulu	State HI Zip Code 96815-4244	
Purpose of Disbursement Political 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) <b>B. Shane J K Nuuhiwa</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 3028 Makini St		Amount of Each Disbursement this Period 470.00 <b>Transaction ID : VN7PG9SB8V3</b>
City Honolulu	State HI Zip Code 96815-4244	
Purpose of Disbursement Political 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) <b>c. Oahu County Democratic Party</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address PO Box 1793		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : VN7PG9RXP08</b>
City Honolulu	State HI Zip Code 96806-1793	
Purpose of Disbursement Convention Attendance Fee	Category/Type 011	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1490.00
<b>TOTAL</b> 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 143 OF 167			
	<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) <b>A. Oahu Print</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address 91-1030 Kaiapo St		Amount of Each Disbursement this Period 4973.82 <b>Transaction ID : VN7PG9SE4Z9</b>
City Ewa Beach	State HI	
Zip Code 96706-6219	Purpose of Disbursement Bumper Stickers and Lapel Stickers	Category/ Type 006
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>B. Oahu Print</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 91-1030 Kaiapo St		Amount of Each Disbursement this Period 596.86 <b>Transaction ID : VN7PG9SA4A3</b>
City Ewa Beach	State HI	
Zip Code 96706-6219	Purpose of Disbursement Bumper Stickers and Lapel Stickers	Category/ Type 006
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>c. Robyn Oishi</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 1114 11th Ave Apt A		Amount of Each Disbursement this Period 420.00 <b>Transaction ID : VN7PG9S8BS0</b>
City Honolulu	State HI	
Zip Code 96816-2476	Purpose of Disbursement Political 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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5990.68
<b>TOTAL</b> 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 144 OF 167	
	<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) <b>A. Robyn Oishi</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 1114 11th Ave Apt A		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : VN7PG9SCNZ1</b>
City Honolulu	State HI Zip Code 96816-2476	
Purpose of Disbursement Political 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) <b>B. Nathan T. Okubo</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 600 Queen St Apt 1211		Amount of Each Disbursement this Period 96.23 <b>Transaction ID : VN8NRCNV4S0I</b>
City Honolulu	State HI Zip Code 96813-5194	
Purpose of Disbursement Event - food	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)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Jesus Puerto</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 1121 Bethel St		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : VN8NRCRTKC8I</b>
City Honolulu	State HI Zip Code 96813-2202	
Purpose of Disbursement Event Food	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)	* In-Kind Received
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	996.23
<b>TOTAL</b> 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 145 OF 167	
	<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) <b>A. Dianne Quiambau</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 87-135 Kaukamana Rd Apt B		Amount of Each Disbursement this Period 520.00 <b>Transaction ID : VN7PG9SA3G7</b>
City Waianae State HI Zip Code 96792-4536	Purpose of Disbursement Political Consulting Candidate Name Category/Type 001	
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>B. Dianne Quiambau</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 87-135 Kaukamana Rd Apt B		Amount of Each Disbursement this Period 370.00 <b>Transaction ID : VN7PG9SCNS4</b>
City Waianae State HI Zip Code 96792-4536	Purpose of Disbursement Political Consulting Candidate Name Category/Type 001	
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>c. Rainbow Family 808</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2014
Mailing Address 92-954 Makakilo Dr Apt 71		Amount of Each Disbursement this Period 240.00 <b>Transaction ID : VN7PG9SCQ83</b>
City Kapolei State HI Zip Code 96707-1340	Purpose of Disbursement Parade Participation Fee Candidate Name Category/Type 007	
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1130.00
<b>TOTAL</b> 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 146 OF 167			
	<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) <b>A. James Rigdon</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address 1816 Dole St		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : VN7PG9S6KR3</b>
City Honolulu State HI Zip Code 96822-3300	Purpose of Disbursement Political Consulting Candidate Name Category/Type 001	
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>B. James Rigdon</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 1816 Dole St		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : VN7PG9S6SD9</b>
City Honolulu State HI Zip Code 96822-3300	Purpose of Disbursement Political Consulting Candidate Name Category/Type 001	
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>c. James Rigdon</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 1816 Dole St		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : VN7PG9SA461</b>
City Honolulu State HI Zip Code 96822-3300	Purpose of Disbursement Political Consulting Candidate Name Category/Type 001	
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5000.00
<b>TOTAL</b> 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 147 OF 167			
	<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) <b>A. James Rigdon</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 1816 Dole St		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : VN7PG9SCP41</b>
City Honolulu	State HI Zip Code 96822-3300	
Purpose of Disbursement Political 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) <b>B. James Rigdon</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2014
Mailing Address 1816 Dole St		Amount of Each Disbursement this Period 3500.00 <b>Transaction ID : VN7PG9SCP59</b>
City Honolulu	State HI Zip Code 96822-3300	
Purpose of Disbursement Political 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) <b>c. Jessica Sato</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address 112 Conselyea St Apt 3R		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : VN7PG9S6KN9</b>
City Brooklyn	State NY Zip Code 11211-2341	
Purpose of Disbursement Graphic Design 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5600.00
<b>TOTAL</b> 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 148 OF 167			
	<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) <b>A. Service Printers Hawaii, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 1829 Dillingham Blvd		Amount of Each Disbursement this Period 219.89 <b>Transaction ID : VN7PG9SCQ75</b>
City Honolulu State HI Zip Code 96819-4020	Purpose of Disbursement Campaign Prospectus 006 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>B. Service Printers Hawaii, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2014
Mailing Address 1829 Dillingham Blvd		Amount of Each Disbursement this Period 566.48 <b>Transaction ID : VN7PG9SCQ68</b>
City Honolulu State HI Zip Code 96819-4020	Purpose of Disbursement Campaign Prospectus 006 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>c. Sheraton Waikiki</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address 2255 Kalakaua Ave		Amount of Each Disbursement this Period 398.87 <b>Transaction ID : VN7PG9S8BY9</b>
City Honolulu State HI Zip Code 96815-2515	Purpose of Disbursement Event - Venue Space 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1185.24
<b>TOTAL</b> 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 149 OF 167			
	<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) <b>A. SMS Research and Marketing</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 1042 Fort Street Mall		Amount of Each Disbursement this Period 11623.03 <b>Transaction ID : VN7PG9S6J26</b>
City Honolulu State HI Zip Code 96813-5600	Purpose of Disbursement Polling Expenses Candidate Name Category/Type 005	
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>B. SMS Research and Marketing</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2014
Mailing Address 1042 Fort Street Mall		Amount of Each Disbursement this Period 9591.62 <b>Transaction ID : VN7PG9SA3B8</b>
City Honolulu State HI Zip Code 96813-5600	Purpose of Disbursement Polling Candidate Name Category/Type 005	
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>c. Solutions Pacific, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 1110 University Ave Ste 309		Amount of Each Disbursement this Period 2513.09 <b>Transaction ID : VN7PG9S6SK6</b>
City Honolulu State HI Zip Code 96826-1508	Purpose of Disbursement Fundraising and Communications Consulting 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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	23727.74
<b>TOTAL</b> 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 150 OF 167			
	<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) <b>A. Rebecca J. I. Soon</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 39 Makaweli St		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : VN7PG9S6RW5</b>
City Honolulu State HI Zip Code 96825-2148	Purpose of Disbursement Reimbursement - Asian Lion Dance Team Fee Candidate Name Category/Type 007	
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>B. Asian Lion Dance Team</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 99-717 Holoai St		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : VN7PG9SCQC5</b>
City Aiea State HI Zip Code 96701-3581	Purpose of Disbursement Lion Dance Entertainment Candidate Name Category/Type 007	
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:	<b>[MEMO ITEM]</b> *

Full Name (Last, First, Middle Initial) <b>c. Rebecca J. I. Soon</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 39 Makaweli St		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : VN7PG9SCP09</b>
City Honolulu State HI Zip Code 96825-2148	Purpose of Disbursement Reimbursement - Pacific Justice and Reconciliation Center Fee Candidate Name Category/Type 007	
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	500.00
<b>TOTAL</b> 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 151 OF 167	
	<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) <b>A. Pacific Justice and Reconciliation Center</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 63 N Beretania St		Amount of Each Disbursement this Period 300.00
City Honolulu	State HI Zip Code 96817-4711	
Purpose of Disbursement Fee for Office Blessing		Transaction ID : VN7PG9SCQD3
Candidate Name		
Office Sought:	Disbursement For: 2014	[MEMO ITEM] *
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 007	

Full Name (Last, First, Middle Initial) <b>B. Rebecca J. I. Soon</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 39 Makaweli St		Amount of Each Disbursement this Period 331.17
City Honolulu	State HI Zip Code 96825-2148	
Purpose of Disbursement Reimbursement - Event Food, Drink and Supplies		Transaction ID : VN7PG9SCN07
Candidate Name		
Office Sought:	Disbursement For: 2014	[MEMO ITEM] *
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 007	

Full Name (Last, First, Middle Initial) <b>c. Accel Party Rentals</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 99-1405 Koaha Pl		Amount of Each Disbursement this Period 85.34
City Aiea	State HI Zip Code 96701-5613	
Purpose of Disbursement Table and Chair Rental		Transaction ID : VN7PG9SJ7W4
Candidate Name		
Office Sought:	Disbursement For: 2014	[MEMO ITEM] *
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 007	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	331.17
<b>TOTAL</b> 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 152 OF 167	
	<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) <b>A. Lin's Leis</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 1017 Maunakea St		Amount of Each Disbursement this Period 65.00
City Honolulu	State HI Zip Code 96817-5161	
Purpose of Disbursement Leis	Category/Type 007	Transaction ID : VN7PG9SJ839
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>B. Safeway</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 5918 Stoneridge Mall Rd		Amount of Each Disbursement this Period 177.69
City Pleasanton	State CA Zip Code 94588-3229	
Purpose of Disbursement Event Food and Drink	Category/Type 007	Transaction ID : VN7PG9SJ871
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>c. Timothy M. Stanton</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 5404 Poola St		Amount of Each Disbursement this Period 194.14
City Honolulu	State HI Zip Code 96821-1539	
Purpose of Disbursement Reimbursement - Event Food and Drink	Category/Type 007	Transaction ID : VN7PG9SCQ91
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	194.14
<b>TOTAL</b> 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 153 OF 167	
	<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) <b>A. Costco</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address PO Box 34331		Amount of Each Disbursement this Period 168.25
City Seattle	State WA	
Zip Code 98124-1331	Purpose of Disbursement Event Food and Drink	Transaction ID : VN7PG9SK166
Candidate Name	Category/ Type 007	
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>B. Safeway</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address 5918 Stoneridge Mall Rd		Amount of Each Disbursement this Period 25.89
City Pleasanton	State CA	
Zip Code 94588-3229	Purpose of Disbursement Event Food and Drink	Transaction ID : VN7PG9SK158
Candidate Name	Category/ Type 007	
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>c. Randy F Stovall</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 401 Atkinson Dr		Amount of Each Disbursement this Period 50.00
City Honolulu	State HI	
Zip Code 96814-4729	Purpose of Disbursement Political Consulting	Transaction ID : VN7PG9S8BK2
Candidate Name	Category/ Type 001	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	50.00
<b>TOTAL</b> 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 154 OF 167	
	<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) <b>A. Gary K Tanimitsu</b>		Date of Disbursement MM / DD / YYYY 06 / 13 / 2014
Mailing Address 3230 Ala Ilima St Apt 302		Amount of Each Disbursement this Period 80.00 <b>Transaction ID : VN7PG9SCQ34</b>
City Honolulu	State HI Zip Code 96818-2912	
Purpose of Disbursement Political 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) <b>B. The Pacific Club</b>		Date of Disbursement MM / DD / YYYY 04 / 02 / 2014
Mailing Address 1451 Queen Emma St		Amount of Each Disbursement this Period 945.84 <b>Transaction ID : VN7PG9S6J76</b>
City Honolulu	State HI Zip Code 96813-2003	
Purpose of Disbursement Event Food and Drink	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>c. Theseus Advisors</b>		Date of Disbursement MM / DD / YYYY 04 / 29 / 2014
Mailing Address PO Box 8284		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : VN7PG9SCPA8</b>
City Burlington	State VT Zip Code 05402-8284	
Purpose of Disbursement Fundraising and Compliance Consulting	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1525.84
<b>TOTAL</b> 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 155 OF 167			
	<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) <b>A. Steven Toomey</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 45-166 Lilipuna Rd		Amount of Each Disbursement this Period 590.00 <b>Transaction ID : VN7PG9S8BP6</b>
City Kaneohe State HI Zip Code 96744-3023	Purpose of Disbursement Political Consulting Candidate Name Category/Type 001	
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>B. Steven Toomey</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 45-166 Lilipuna Rd		Amount of Each Disbursement this Period 540.00 <b>Transaction ID : VN7PG9S8BT5</b>
City Kaneohe State HI Zip Code 96744-3023	Purpose of Disbursement Political Consulting Candidate Name Category/Type 001	
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>c. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address 233 S Wacker Dr		Amount of Each Disbursement this Period 1009.39 <b>Transaction ID : VN7PG9SA4B1</b>
City Chicago State IL Zip Code 60606-7147	Purpose of Disbursement Air Travel Candidate Name Category/Type 002	
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2139.39
<b>TOTAL</b> 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 156 OF 167			
	<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) <b>A. US Post Office</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 335 Merchant St		Amount of Each Disbursement this Period 19.99
City Honolulu	State HI Zip Code 96813-2945	
Purpose of Disbursement Postage/Shipping	Category/Type 001	<b>Transaction ID : VN7PG9SCQA9</b>
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>B. Elliott Van Wie</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2014
Mailing Address 1662 Lewalani Dr Apt 301		Amount of Each Disbursement this Period 300.00
City Honolulu	State HI Zip Code 96822-2727	
Purpose of Disbursement Political Consulting	Category/Type 001	<b>Transaction ID : VN7PG9SCQ26</b>
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>c. Vesta</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 11950 SW Garden Pl		Amount of Each Disbursement this Period 52.35
City Portland	State OR Zip Code 97223	
Purpose of Disbursement Phones	Category/Type 001	<b>Transaction ID : VN7PG9SA4C9</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	372.34
<b>TOTAL</b> 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 157 OF 167			
	<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) <b>A. Vesta</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 11950 SW Garden Pl		Amount of Each Disbursement this Period 52.35
City Portland	State OR	
Zip Code 97223	Purpose of Disbursement Phones	<b>Transaction ID : VN7PG9SA4D6</b>
Candidate Name	001 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>B. Mark J. Wallem</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 2440 Kuhio Ave Apt 1012		Amount of Each Disbursement this Period 340.00
City Honolulu	State HI	
Zip Code 96815-3350	Purpose of Disbursement Political Consulting	<b>Transaction ID : VN7PG9SA3D4</b>
Candidate Name	001 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>c. Mark J. Wallem</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 2440 Kuhio Ave Apt 1012		Amount of Each Disbursement this Period 50.00
City Honolulu	State HI	
Zip Code 96815-3350	Purpose of Disbursement Political Consulting	<b>Transaction ID : VN7PG9SE3Z6</b>
Candidate Name	001 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	442.35
<b>TOTAL</b> 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 158 OF 167	
	<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) <b>A. Don Weigel</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 7910 Michael Rd		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : VN7PG9S6J34</b>
City Orchard Park	State NY Zip Code 14127-1464	
Purpose of Disbursement Political Consulting	001 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>B. Don Weigel</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 7910 Michael Rd		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : VN7PG9S6JB7</b>
City Orchard Park	State NY Zip Code 14127-1464	
Purpose of Disbursement Political Consulting	001 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>c. Don Weigel</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address 7910 Michael Rd		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : VN7PG9S6KS1</b>
City Orchard Park	State NY Zip Code 14127-1464	
Purpose of Disbursement Political Consulting	001 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9000.00
<b>TOTAL</b> 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 159 OF 167	
	<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) <b>A. Don Weigel</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address 7910 Michael Rd		Amount of Each Disbursement this Period 272.23 <b>Transaction ID : VN7PG9SE523</b>
City Orchard Park State NY Zip Code 14127-1464	Purpose of Disbursement Reimbursement - Office Supplies Candidate Name Category/Type 001	
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>B. Cartridge World Honolulu</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2014
Mailing Address 1124 Kohou St		Amount of Each Disbursement this Period 272.23 <b>Transaction ID : VN7PG9SJDK6</b>
City Honolulu State HI Zip Code 96817-3340	Purpose of Disbursement Office Supplies 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:	<b>[MEMO ITEM]</b> *

Full Name (Last, First, Middle Initial) <b>c. Don Weigel</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 7910 Michael Rd		Amount of Each Disbursement this Period 1142.39 <b>Transaction ID : VN7PG9SA4P8</b>
City Orchard Park State NY Zip Code 14127-1464	Purpose of Disbursement Reimbursement - Office Supplies Candidate Name Category/Type 001	
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1414.62
<b>TOTAL</b> 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 160 OF 167	
	<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) <b>A. Best Buy</b>		Date of Disbursement MM / DD / YYYY 05 / 07 / 2014
Mailing Address 7601 Penn Ave S		Amount of Each Disbursement this Period 13.60
City Richfield	State MN	Zip Code 55423-3683
Purpose of Disbursement Office Supplies	Category/Type 001	
Candidate Name		Transaction ID : VN7PG9SA4Q5
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:	[MEMO ITEM] *	

Full Name (Last, First, Middle Initial) <b>B. City Mill</b>		Date of Disbursement MM / DD / YYYY 05 / 07 / 2014
Mailing Address PO Box 1559		Amount of Each Disbursement this Period 220.61
City Honolulu	State HI	Zip Code 96806-1559
Purpose of Disbursement Office Supplies	Category/Type 001	
Candidate Name		Transaction ID : VN7PG9SA4S1
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:	[MEMO ITEM] *	

Full Name (Last, First, Middle Initial) <b>C. City Mill</b>		Date of Disbursement MM / DD / YYYY 05 / 07 / 2014
Mailing Address PO Box 1559		Amount of Each Disbursement this Period 239.79
City Honolulu	State HI	Zip Code 96806-1559
Purpose of Disbursement Office Supplies	Category/Type 001	
Candidate Name		Transaction ID : VN7PG9SA507
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:	[MEMO ITEM] *	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 161 OF 167	
	<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) <b>A. Longs Drug Stores</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 141 N Civic Dr		Amount of Each Disbursement this Period ..... 10.64
City Walnut Creek	State CA Zip Code 94596-3815	
Purpose of Disbursement Office Supplies	Category/Type 001	Transaction ID : VN7PG9SA4T9
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>B. Longs Drug Stores</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 141 N Civic Dr		Amount of Each Disbursement this Period ..... 5.43
City Walnut Creek	State CA Zip Code 94596-3815	
Purpose of Disbursement Office Supplies	Category/Type 001	Transaction ID : VN7PG9SA4V7
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>c. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 6600 N Military Trl		Amount of Each Disbursement this Period ..... 86.36
City Boca Raton	State FL Zip Code 33496-2434	
Purpose of Disbursement Office supplies	Category/Type 001	Transaction ID : VN7PG9SA4Y1
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	..... 0.00
<b>TOTAL</b> 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 162 OF 167	
	<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) <b>A. Office Depot</b>		Date of Disbursement MM / DD / YYYY 05 / 07 / 2014
Mailing Address 6600 N Military Trl		Amount of Each Disbursement this Period 65.39
City Boca Raton	State FL	
Zip Code 33496-2434	Purpose of Disbursement Office supplies	Transaction ID : VN7PG9SA4Z9
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>B. Target</b>		Date of Disbursement MM / DD / YYYY 05 / 07 / 2014
Mailing Address 900 Nicollet Mall		Amount of Each Disbursement this Period 94.01
City Minneapolis	State MN	
Zip Code 55403-2530	Purpose of Disbursement Office supplies	Transaction ID : VN7PG9SA4X3
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>c. The Home Depot</b>		Date of Disbursement MM / DD / YYYY 05 / 07 / 2014
Mailing Address 2455 Paces Ferry Rd SE		Amount of Each Disbursement this Period 11.38
City Atlanta	State GA	
Zip Code 30339-1834	Purpose of Disbursement Office Supplies	Transaction ID : VN7PG9S6S89
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 163 OF 167	
	<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) <b>A. The Home Depot</b>		Date of Disbursement MM / DD / YYYY 05 / 07 / 2014
Mailing Address 2455 Paces Ferry Rd SE		Amount of Each Disbursement this Period 23.02
City Atlanta	State GA Zip Code 30339-1834	
Purpose of Disbursement Office Supplies	Category/Type 001	Transaction ID : VN7PG9SA4R3
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>B. U-Haul</b>		Date of Disbursement MM / DD / YYYY 05 / 07 / 2014
Mailing Address 2727 N Central Ave		Amount of Each Disbursement this Period 116.64
City Phoenix	State AZ Zip Code 85004-1155	
Purpose of Disbursement Office Supplies	Category/Type 001	Transaction ID : VN7PG9SA514
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>c. Wal-Mart</b>		Date of Disbursement MM / DD / YYYY 05 / 07 / 2014
Mailing Address 700 Keeaumoku St		Amount of Each Disbursement this Period 159.46
City Honolulu	State HI Zip Code 96814-3014	
Purpose of Disbursement Office Supplies	Category/Type 001	Transaction ID : VN7PG9S6S64
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 164 OF 167	
	<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) <b>A. Wal-Mart</b>		Date of Disbursement MM / DD / YYYY 05 / 07 / 2014
Mailing Address 700 Keeaumoku St		Amount of Each Disbursement this Period 96.08
City Honolulu	State HI Zip Code 96814-3014	
Purpose of Disbursement Office Supplies	Category/Type 001	Transaction ID : VN7PG9SA4W5
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>B. Don Weigel</b>		Date of Disbursement MM / DD / YYYY 05 / 14 / 2014
Mailing Address 7910 Michael Rd		Amount of Each Disbursement this Period 3300.00
City Orchard Park	State NY Zip Code 14127-1464	
Purpose of Disbursement Political Consulting	Category/Type 001	Transaction ID : VN7PG9S6SS4
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>c. Don Weigel</b>		Date of Disbursement MM / DD / YYYY 05 / 14 / 2014
Mailing Address 7910 Michael Rd		Amount of Each Disbursement this Period 3000.00
City Orchard Park	State NY Zip Code 14127-1464	
Purpose of Disbursement Political Consulting	Category/Type 001	Transaction ID : VN7PG9S6ST2
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	6300.00
<b>TOTAL</b> 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 165 OF 167			
	<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) <b>A. Don Weigel</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 7910 Michael Rd		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : VN7PG9SA487</b>
City Orchard Park State NY Zip Code 14127-1464	Purpose of Disbursement Political Consulting Candidate Name Category/Type 001	
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>B. Don Weigel</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 7910 Michael Rd		Amount of Each Disbursement this Period 3350.00 <b>Transaction ID : VN7PG9SA301</b>
City Orchard Park State NY Zip Code 14127-1464	Purpose of Disbursement Political Consulting Candidate Name Category/Type 001	
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>c. Jodi Shin Yamamoto</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address 612 Ahakea St Unit 240		Amount of Each Disbursement this Period 2100.00 <b>Transaction ID : VN8NRCRA3041</b>
City Honolulu State HI Zip Code 96816-4702	Purpose of Disbursement Event Food and Drink 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:	* In-Kind Received

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8450.00
<b>TOTAL</b> 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 166 OF 167	
	<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) <b>A. Ivy Yeung</b>		Date of Disbursement MM / DD / YYYY 06 / 29 / 2014
Mailing Address 1000 Bishop St Ste 904		Amount of Each Disbursement this Period 1015.00
City Honolulu	State HI Zip Code 96813-4209	
Purpose of Disbursement Office and Event Supplies	Category/Type	Transaction ID : VN8NRCRQS10I
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:		* In-Kind Received

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY
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:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1015.00
<b>TOTAL</b> This Period (last page this line number only).....	303228.05

**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 167 OF 167			
	<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) <b>A. Floyd Chapman</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 590 Farrington Hwy Unit 210		Amount of Each Disbursement this Period 100.00
City Kapolei	State HI Zip Code 96707-2002	
Purpose of Disbursement Refund of Contribution from April 22	Category/ Type 010	<b>Transaction ID : VN7PG9SCQK0</b>
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>B.</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	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:		

Full Name (Last, First, Middle Initial) <b>C.</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	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	100.00
<b>TOTAL</b> This Period (last page this line number only).....	100.00