

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

Jan 31 9 25 1994

1. NAME OF COMMITTEE (in full)  
Bankcorp Hawaii  
Special Political Education Committee

ADDRESS (number and street)  Check if different than previously reported  
P. O. Box 2900

CITY, STATE and ZIP CODE  
Honolulu, Hawaii 96846

2. FEC IDENTIFICATION NUMBER  
000025668

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

## 4. TYPE OF REPORT

(a)  April 15 Quarterly Report

July 15 Quarterly Report

October 15 Quarterly Report

January 31 Year End Report

July 31 Mid Year Report (Non-election Year Only)

Termination Report

Monthly Report Due On:

- February 20     June 20     October 20  
 March 20     July 20     November 20  
 April 20     August 20     December 20  
 May 20     September 20     January 31

Twelfth day report preceding \_\_\_\_\_  
(Type of Election)  
election on \_\_\_\_\_ in the State of \_\_\_\_\_

Thirtieth day report following the General Election on \_\_\_\_\_  
in the State of \_\_\_\_\_

(c) Is this Report an Amendment?  YES  NO

## SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
01/01/93 through 12/31/93		
6. (a) Cash on Hand January 1, 19 93		\$ 78,994.80
(b) Cash on Hand at Beginning of Reporting Period	\$ 85,809.80	
(c) Total Receipts (from Line 18)	\$ 30,815.00	\$ 62,430.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 116,624.80	\$ 141,424.80
7. Total Disbursements (from Line 30)	\$ 20,025.00	\$ 44,825.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 96,599.80	\$ 96,599.80
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 888 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

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  
Richard J. Dahl

Signature of Treasurer  
*Richard J. Dahl*

Date  
1/21/94

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

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SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1  
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full) Bancorp Hawaii  
Special Political Education Committee

140339773051

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Amemiya, Roy 94-276 Kaeolani Street Mililani, HI 96789 Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Bank of Hawaii Occupation: President	12/31/93	300
Aggregate Year-to-Date > \$ 600			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Awaya, David 2255-A Palolo Avenue Honolulu, HI 96816 Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Bank of Hawaii Occupation: President	12/31/93	300
Aggregate Year-to-Date > \$ 600			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Baptist, Kevin P. O. Box 877 Lahaina, HI 96761 Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Bank of Hawaii Occupation: President	12/31/93	300
Aggregate Year-to-Date > \$ 600			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Barton, William J. 218 Aikane Street Kailua, HI 96734 Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Hawaiian Trust Co. Occupation: Senior Vice Pres.	12/31/93	300
Aggregate Year-to-Date > \$ 600			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Blume, Robert P. O. Box BH Agana, GU 96910 Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Bank of Hawaii Occupation: Senior Vice Pres.	12/31/93	300
Aggregate Year-to-Date > \$ 600			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Boe, Monica 1511 Nuuanu Ave., #147 Honolulu, HI 96817 Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Hawaiian Trust Co. Occupation: Vice President	12/31/93	300
Aggregate Year-to-Date > \$ 600			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bourke, Susan 2101 Nuuanu Ave., #2007 Honolulu, HI 96817 Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Bank of Hawaii Occupation: Vice President	12/31/93	300
Aggregate Year-to-Date > \$ 600			

SUBTOTAL of Receipts This Page (optional)

2100.00

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 2 OF 11  
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full) Bancorp Hawaii  
Special Political Education Committee

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Buehler, David P. O. Box 566 Saipan, CNMI 96950	Bank of Hawaii	12/31/93	200
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Vice President	Aggregate Year-to-Date > \$440	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Chang, David 1983 Ala Mahanoe Place Honolulu, HI 96816	Bank of Hawaii	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Vice President	Aggregate Year-to-Date > \$600	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Chun, Joanne 3424 Pahoa Avenue Honolulu, HI 96816	Bank of Hawaii	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Senior Vice Pres.	Aggregate Year-to-Date > \$600	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Chun, Michael 2154 Hakanu Street Honolulu, HI 96821	Bancorp Investment	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: President	Aggregate Year-to-Date > \$600	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Cool, Robert M. 44-5563 Kaneohe Bay Drive Kaneohe, HI 96744	Bank of Hawaii	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Senior Vice Pres.	Aggregate Year-to-Date > \$ 600	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Cordial, Benjamin 98-1363 Akaaka Aiea, HI 96701	Bank of Hawaii	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Vice President	Aggregate Year-to-Date > \$ 600	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Derby, John M. 1711 Uhi Place Honolulu, HI 96821	Bank of Hawaii	12/31/93	-0-
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Senior Vice Pres.	Aggregate Year-to-Date > \$ 300	

SUBTOTAL of Receipts This Page (optional)	1,700.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 3 OF 17  
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full) **Bankcorp Hawaii  
Special Political Education Committee**

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A. Full Name, Mailing Address and ZIP Code Drewliner, Peter 4668 Aukai Avenue Honolulu, HI 96816 Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Name of Employer Bank of Hawaii Position: <b>Senior Vice Pres.</b> Aggregate Year-to-Date > \$600	Date (month, day, year) 12/31/93	Amount of Each Receipt This Period 300
B. Full Name, Mailing Address and ZIP Code Field, John 6066 Haleola Street Honolulu, HI 96821 Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Name of Employer Bank of Hawaii Position: <b>Senior Vice Pres.</b> Aggregate Year-to-Date > \$720	Date (month, day, year) 12/31/93	Amount of Each Receipt This Period 360
C. Full Name, Mailing Address and ZIP Code Fong, Bonnie 4243 Pahoa Ave. Honolulu, HI 96816 Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Name of Employer Hawaiian Trust Co. Position: <b>Vice President</b> Aggregate Year-to-Date > \$600	Date (month, day, year) 12/31/93	Amount of Each Receipt This Period 300
D. Full Name, Mailing Address and ZIP Code Fujii, Robert 1561 Kanunu St., #702 Honolulu, HI 96814 Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Name of Employer Bank of Hawaii Position: <b>President</b> Aggregate Year-to-Date > \$600	Date (month, day, year) 12/31/93	Amount of Each Receipt This Period 300
E. Full Name, Mailing Address and ZIP Code Fujiyama, Stanley 2100 Date St., #1706 Honolulu, HI 96826 Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Name of Employer Bank of Hawaii Position: <b>Vice President</b> Aggregate Year-to-Date > \$600	Date (month, day, year) 12/31/93	Amount of Each Receipt This Period 300
F. Full Name, Mailing Address and ZIP Code Fukuda, Michie 1134 Kumano Street Pearl City, HI 96782 Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Name of Employer Bank of Hawaii Position: <b>President</b> Aggregate Year-to-Date > \$600	Date (month, day, year) 12/31/93	Amount of Each Receipt This Period 300
G. Full Name, Mailing Address and ZIP Code Gibbs-Fisher, Carol A. 935 Makiki Street Honolulu, HI 96822 Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Name of Employer Hawaiian Trust Co. Position: <b>President</b> Aggregate Year-to-Date > \$600	Date (month, day, year) 12/31/93	Amount of Each Receipt This Period 300

SUBTOTAL of Receipts This Page (optional) .....	
TOTAL This Period (last page this line number only) .....	2160.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in Full) **Bankcorp Hawaii  
Special Political Education Committee**

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Giro, David 5628 Halekamani Street Honolulu, HI 96821	Bank of Hawaii President	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Groom, Brian 1320 Auwaiku Street Kailua, HI 96734	Bank of Hawaii President	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 600		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hagen, George T. 45-445 Pua Inia Street Kaneohe, HI 96744	Bank of Hawaii President	12/31/93	180
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 330		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hughson, David 1022 Kalahu Place Honolulu, HI 96825	Bank of Hawaii President	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 600		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hunt, Donna 883 Leighton Street Honolulu, HI 96821	Bank of Hawaii Senior Vice Pres.	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 600		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Idemoto, Ronald 98-897 Aihauui Loop Aiea, HI 96701	Bank of Hawaii Vice President	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 600		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Isono, Denis 5415 Kilauea Place Honolulu, HI 96816	Bank of Hawaii Vice President	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 600		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1980.00
<b>TOTAL</b> This Period (last page this line number only) .....	

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 5 OF 17  
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full) **Bankcorp Hawaii  
Special Political Education Committee**

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kam, Denis 1435 Ihiloa Loop Honolulu, HI 96821	Bank of Hawaii	12/31/93	300
Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Senior Vice Pres.		
Aggregate Year-to-Date > \$600			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Karasaki, Jarrett 45-519 Ihiloa Loop Honolulu, HI 96821	Bank of Hawaii	2/31/93	300
Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Vice President		
Aggregate Year-to-Date > \$600			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kihara, Melvyn Y. 4589 Malae Street Lihue, HI 96766	Bank of Hawaii	2/31/93	300
Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Vice President		
Aggregate Year-to-Date > \$600			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kimura, Rodney P. O. Box BH Agana, GU 96910	Bank of Hawaii	12/31/93	300
Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Vice President		
Aggregate Year-to-Date > \$600			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Koide, Thomas 2109 Laukahi Street Honolulu, HI 96821	Bank of Hawaii	2/31/93	210
Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Vice President		
Aggregate Year-to-Date > \$420			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Komata, Ronald 98-867 Laelua Place Aiea, HI 96701	Bank of Hawaii	12/31/93	300
Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Vice President		
Aggregate Year-to-Date > \$600			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kuraoka, Emily 95-262 Waioloka Street Mililani, HI 96789	Bank of Hawaii	2/31/93	300
Receipt For: <input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Vice President		
Aggregate Year-to-Date > \$600			

SUBTOTAL of Receipts This Page (optional) ..... 2010.00

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

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 5 OF 11  
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full) Bancorp Hawaii  
Special Political Education Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lyons, Michael P. O. Box 355 Makawao, HI 96793	Bank of Hawaii	12/31/93	390
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Senior Vice Pres.		Aggregate Year-to-Date: \$780
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Macdonald, Thomas J. 344 Wailupe Circle Honolulu, HI 96825	Hawaiian Trust Co.	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Vice Pres.		Aggregate Year-to-Date: \$500
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Machara, Paul I. 94-416 Kealakaa Street Miliilani, HI 96789	Bank of Hawaii	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Vice President		Aggregate Year-to-Date: \$600
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marsh, John 418 Huali Place Hilo, HI 96720	Bank of Hawaii	12/31/93	-0-
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Vice President		Aggregate Year-to-Date: \$250
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Masada, Stanley M. 581 Kamoku St., #1504 Honolulu, HI 96826	Hawaiian Trust Co.	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Vice President		Aggregate Year-to-Date: \$600
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Massey, James 1448 Bhupua Street Honolulu, HI 96825	Bank of Hawaii	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Senior Vice Pres.		Aggregate Year-to-Date: \$600
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Matsuo, Roy 98-1864 Piki Aiea, HI 96701	Bank of Hawaii	12/31/93	240
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Vice President		Aggregate Year-to-Date: \$480

SUBTOTAL of Receipts This Page (optional)

1830.00

TOTAL This Period (last page this line number only)





SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 8 OF 17  
FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (in Full) Bancorp Hawaii  
Special Political Education Committee

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nishihara, Henry 501 Analu Street Honolulu, HI 96817	Bank of Hawaii	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Executive Vice Pres.		
Aggregate Year-to-Date > \$600			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
O'Brien, Michael 21 Victoria St., #1203 Honolulu, HI 96814	Hawaiian Trust Co.	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Vice President		
Aggregate Year-to-Date > \$600			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ord, William M. P. O. Box 2900 Honolulu, HI 96846	Bank of Hawaii	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Vice President		
Aggregate Year-to-Date > \$600			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Otake, Ruby 95-278 Kupuku Circle Mililani, HI 96789	Bank of Hawaii	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
Aggregate Year-to-Date > \$600			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Pagliari, Salvatore 195 Alala Road Kailua, HI 96734	Bank of Hawaii	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Vice President		
Aggregate Year-to-Date > \$600			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Pan, Karl 625 Poipu Drive Honolulu, HI 96825	Bank of Hawaii	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Vice President		
Aggregate Year-to-Date > \$600			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paris, Robert W. 705 Pahumele Way Kailua, HI 96734	Bank of Hawaii	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Senior Vice Pres.		
Aggregate Year-to-Date > \$600			

SUBTOTAL of Receipts: This Page (optional)

2100.00

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

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 3 OF 17  
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full) Bankcorp Hawaii  
Special Political Education Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Patterson, James 2333 Kapiolani Blvd., #2711 Honolulu, HI 96826 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Bank of Hawaii <del>Vice President</del> Occupation	12/31/93	300
Aggregate Year-to-Date > \$600			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Philipotts, Douglas 60 Country Club Road Honolulu, HI 96817 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hawaiian Trust Co. <del>Chairman</del> Occupation	12/31/93	300
Aggregate Year-to-Date > \$600			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RHO, Melvin 5251 Halapepe Street Honolulu, HI 96821 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Bank of Hawaii <del>Vice President</del> Occupation	12/31/93	300
Aggregate Year-to-Date > \$600			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rodin, James 1030 Aoloa Pl., #112A Kailua, HI 96734 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hawaiian Trust Co. <del>Vice President</del> Occupation	12/31/93	300
Aggregate Year-to-Date > \$600			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Saito, Mamoru 1436 Akckeke Place Kailua, HI 96734 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Bank of Hawaii <del>Vice President</del> Occupation	12/31/93	240
Aggregate Year-to-Date > \$480			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sakazaki, Sanyuki 7232 Aipo Place Honolulu, HI 96825 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Bank of Hawaii <del>Vice President</del> Occupation	12/31/93	150
Aggregate Year-to-Date > \$450			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sakoeki, Robert M. 47-693 Hui Alala Kaneohe, HI 96744 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Bank of Hawaii <del>Vice President</del> Occupation	12/31/93	300
Aggregate Year-to-Date > \$600			

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SUBTOTAL of Receipts This Page (optional)	1890.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 10 OF 17  
FOR LINE NUMBER 11(a)(i)

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) **Bankcorp Hawaii  
Special Political Education Committee**

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Schrank, John A. P. O. Box 37429 Honolulu, HI 96737	Bank of Hawaii President	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$600		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Senda, Dean 3143 E. Manoa Rd. Honolulu, HI 96822	Bank of Hawaii President	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$600		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Seta, Joji 2122 Ahapili Place Honolulu, HI 96821	Bank of Hawaii President	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$600		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Shimizu, Mary 94-159 Paionia Place Mililani, HI 96789	Bank of Hawaii President	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$600		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Stevenson, Douglas T. 463 Iana Street Kailua, HI 96734	Hawaiian Trust Co. Vice President	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$600		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sunada, Brian 823 Lukepane Ave. Honolulu, HI 96816	Bank of Hawaii Vice President	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$600		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Takahashi, Wayne 94-449 Hokualea Street Mililani, HI 96789	Bank of Hawaii Vice President	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$600		

SUBTOTAL of Receipts This Page (optional) ..... 2100.00

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

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 11 OF 17  
FOR LINE NUMBER 11(a)(i)

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) Bancorp Hawaii  
Special Political Education Committee

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Taylor, David M. 4675 Aukai Avenue Honolulu, HI 96816	Bank of Hawaii President	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 600			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Tetmeyer, William 250 Kawaihae St., #11C Honolulu, HI 96825	Bank of Hawaii President	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 600			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Tokunaga, Kazuko 94-529 Hiapaloie Waipahu, HI 96797	Bank of Hawaii President	12/31/93	150
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 450			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Tom, Elizabeth Loui 742 Hawaii Street Honolulu, HI 96817	Bank of Hawaii President	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 600			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Triggs, Thomas 633 Kaimalino Street Kailua, HI 96734	Bank of Hawaii President	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 600			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Turran, Robert 876-A Aalapapa Drive Kailua, HI 96734	Bank of Hawaii President	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 600			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Uehara, Michael 98-2071 Kipikua Street Kailua, HI 96734	Bank of Hawaii Vice President	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 600			

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

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

1950.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 12 OF 17

FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (In Full) Bancorp Hawaii  
Special Political Education Committee

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Umbhau, Werner 66 Kaikaina Street Kailua, HI 96734	Bank of Hawaii President	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 600		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Uyekubo, Gerry 1021 Waakaua Place Kailua, HI 96734	Bank of Hawaii Senior Vice Pres.	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 600		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
West, Richard N. 10 Hina Street Hilo, HI 96720	Bank of Hawaii Vice President	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 600		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Wong, Wilton 75-362 Hoone Street Kailua-Kona, HI 96740	Bank of Hawaii Vice President	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 600		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Yamamoto, Alvin 1445 Ala Leie Place Honolulu, HI 96818	Bank of Hawaii Senior Vice Pres.	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 600		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Yamada, Patrick 4006 Palua Place Honolulu, HI 96816	Bank of Hawaii Vice President	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 600		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Yamanaka, Ruthann 473 Akaka Place Honolulu, HI 96822	Bank of Hawaii Vice President	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 600		

SUBTOTAL of Receipts This Page (optional) 2100.00

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 13 OF 17  
FOR LINE NUMBER 11(a)(1)

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) Bancorp Hawaii  
Special Political Education Committee

**A. Full Name, Mailing Address and ZIP Code**

Young, Bill  
46-328 Kahuhipa Street  
Kaneohe, HI 96744

Name of Employer

Bank of Hawaii

Date (month, day, year)

12/31/93

Amount of Each Receipt this Period

300

President

Receipt For:  Primary  General  
 Other (specify):

Aggregate Year-to-Date > \$500

**B. Full Name, Mailing Address and ZIP Code**

Yu, Henry  
502 Poipu Drive  
Honolulu, HI 96825

Name of Employer

Bank of Hawaii

Date (month, day, year)

12/31/93

Amount of Each Receipt this Period

300

President

Receipt For:  Primary  General  
 Other (specify):

Aggregate Year-to-Date > \$500

**C. Full Name, Mailing Address and ZIP Code**

Scrfoss, David G.  
4818 Analii Street  
Honolulu, HI 96821

Name of Employer

Hawaiian Trust Co.

Date (month, day, year)

12/31/93

Amount of Each Receipt this Period

300

President

Receipt For:  Primary  General  
 Other (specify):

Aggregate Year-to-Date > \$500

**D. Full Name, Mailing Address and ZIP Code**

Alexander, Judy  
329 Ilimalia Loop  
Kailua, HI 96734

Name of Employer

Hawaiian Trust Co.

Date (month, day, year)

12/31/93

Amount of Each Receipt this Period

150

President

Receipt For:  Primary  General  
 Other (specify):

Aggregate Year-to-Date > \$300

**E. Full Name, Mailing Address and ZIP Code**

Chang, Harvey  
95-1057 Haalohe Street  
Mililani, HI 96789

Name of Employer

Bank of Hawaii

Date (month, day, year)

12/31/93

Amount of Each Receipt this Period

200

President

Receipt For:  Primary  General  
 Other (specify):

Aggregate Year-to-Date > \$350

**F. Full Name, Mailing Address and ZIP Code**

Chaves, Richard  
6087 Keeki Place  
Honolulu, HI 96821

Name of Employer

Bank of Hawaii

Date (month, day, year)

12/31/93

Amount of Each Receipt this Period

125

President

Receipt For:  Primary  General  
 Other (specify):

Aggregate Year-to-Date > \$275

**G. Full Name, Mailing Address and ZIP Code**

Chinn, Curtis  
1210 Mokuhano Street  
Honolulu, HI 96825

Name of Employer

Bank of Hawaii

Date (month, day, year)

12/31/93

Amount of Each Receipt this Period

150

Senior Vice Pres.

Receipt For:  Primary  General  
 Other (specify):

Aggregate Year-to-Date > \$300

SUBTOTAL of Receipts This Page (optional)

1525.00

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 14 OF 17  
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full) **Bankcorp Hawaii  
Special Political Education Committee**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Crowell, Robert 1362 Akalani Place Kailua, HI 96734	Bank of Hawaii	12/31/93	150
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<del>Secretary</del> Vice Pres.		
Aggregate Year-to-Date > \$ 300			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Cruz, John P. O. Box 23327 Agana, GU 96910	Bank of Hawaii	12/31/93	150
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<del>Chairman</del> President		
Aggregate Year-to-Date > \$ 300			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Fujioka, Robert 145 Kaiolohia Way Honolulu, HI 96825	Bank of Hawaii	12/31/93	150
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<del>Chairman</del> President		
Aggregate Year-to-Date > \$ 300			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Hagen, Janylani 45-445 Pua Inia Street Kaneohe, HI 96744	Bank of Hawaii	12/31/93	150
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<del>Chairman</del> President		
Aggregate Year-to-Date > \$ 300			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Holden, Thomas 94-348 Hokualea St., #118 Mililani, HI 96789	Hawaiian Trust Co.	12/31/93	150
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<del>Chairman</del> President		
Aggregate Year-to-Date > \$ 300			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Hoshino, John 94-348 Kahualena Street Waipahu, HI 96797	Hawaiian Trust Co.	12/31/93	150
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<del>Chairman</del> President		
Aggregate Year-to-Date > \$ 300			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jordanou, Andreas P. O. Box BH Agana, GU 96910	Bank of Hawaii	12/31/93	300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<del>Chairman</del> Vice President		
Aggregate Year-to-Date > \$ 300			

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

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

1200.00



**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 15 OF 17  
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full) **Bancorp Hawaii  
Special Political Education Committee**

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kono, Clyde 597 Imi Drive Wailuku, HI 96793	Bank of Hawaii Education President	12/31/93	150
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lee, Willard 98-505 Kilihou Loop Aiea, HI 96701	Bank of Hawaii Education President	12/31/93	150
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lock, Dennis 620 Aipo Street Honolulu, HI 96825	Hawaiian Trust Co. Education President	12/31/93	150
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mosher-Cates, Monica 1146 Uluopihi Loop Kailua, HI 96734	Hawaiian Trust Co. Education President	12/31/93	150
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nagasako, Carl 752B Olili Place Honolulu, HI 96821	Bank of Hawaii Education President	12/31/93	150
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nishihara, Alvin P. O. Box 1204 Wailuku, HI 96793	Bank of Hawaii Education President	12/31/93	150
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Osterman, Gary 1050 Lunalilo St., #1206 Honolulu, HI 96822	Bancorp Leasing President	12/31/93	150
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1050.00
<b>TOTAL</b> This Period (last page this line number only) .....	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 16 OF 17  
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full) **Bankcorp Hawaii  
Special Political Education Committee**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sonnenberg, Royce 303R Mananai Place Honolulu, HI 96818 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hawaiian Trust Co. Vice President	12/31/93	150
Aggregate Year-to-Date > \$ 300			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Tagami, Dale 94-321 Kamalei Street Mililani, HI 96789 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Bank of Hawaii Vice President	12/31/93	150
Aggregate Year-to-Date > \$ 300			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Tomber, Barbara 2895 Kalakaua Ave. Honolulu, HI 96815 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Bank of Hawaii Senior Vice Pres.	12/31/93	150
Aggregate Year-to-Date > \$ 300			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Uemac, Ralph 914 Wainiha Street Honolulu, HI 96825 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hawaiian Trust Co. Vice President	12/31/93	150
Aggregate Year-to-Date > \$ 300			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Watanabe, Jane 47-445 Ahuimanu Place Kaneohe, HI 96744 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Bank of Hawaii Vice President	12/31/93	150
Aggregate Year-to-Date > \$ 300			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Weir, George 60 N. Beretania St., #2010 Honolulu, HI 96817 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hawaiian Trust Co. Vice President	12/31/93	150
Aggregate Year-to-Date > \$ 300			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Wong, Gordon 46-121 Hinapu Kaneohe, HI 96744 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Bank of Hawaii Vice President	12/31/93	150
Aggregate Year-to-Date > \$ 300			

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

1050.00

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

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**SCHEDULE A**

**ITEMIZED RECEIPTS**

All 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) **Bancorp Hawaii  
 Special Political Education Committee**

040387333

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
DuPont, Nicole P. O. Box 1209 Honolulu, HI 96807 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Bank of Hawaii President	12/31/93	120
Aggregate Year-to-Date > \$240			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Sherman, James 1221 Victoria St., #504 Honolulu, HI 96814 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hawaiian Trust Co. President	12/31/93	120
Aggregate Year-to-Date > \$240			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Imada, Alvin 280 Kahiki Street Kahului, HI 96732 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Bank of Hawaii President	12/31/93	150
Aggregate Year-to-Date > \$300			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date > \$			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date > \$			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date > \$			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date > \$			

SUBTOTAL of Receipts This Page (optional) .....	390.00
TOTAL This Period (list page this line number only) .....	29,235.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 23

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) Bancorp Hawaii Special Political Education Committee

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A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Patsy T. Mink P. O. Box 4452 Honolulu, HI 96812	Hawaii- House of Rep. (Fundraiser) 2nd Dist. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/11/93	500.00
B. Full Name, Mailing Address and ZIP Code ABA Bankpac 1120 Connecticut Ave., NW Washington, DC 20036	Purpose of Disbursement Donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/10/93	600.00
C. Full Name, Mailing Address and ZIP Code Neil Abernombie 1142 Auahi Street, 2/20 Honolulu, HI 96814	Purpose of Disbursement Hawaii - House of Rep. 1st Dist. (Fundraiser) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/21/93	300.00
D. Full Name, Mailing Address and ZIP Code Daniel K. Akaka P. O. Box 3169 Honolulu, HI 96802	Purpose of Disbursement Hawaii - U.S. Senate (Fundraiser) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/10/93	2,000.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUB TOTAL of Disbursements This Page (optional) .....	3,400.00
TOTAL This Period (last page this line number only) .....	3,400.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 5  
FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full) **Ranxcorp Hawaii  
Special Political Education Committee**

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A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Clayton Heo P. O. Box 4484 Kaneohe, HI 96744	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/2/93	2000.00
Steve Yamashiro P. O. Box 99 Kuaau, HI 96749	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/9/93	2000.00
Ron Menor 95 262 Auhale Loop Mililani, HI 96789	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/11/93	200.00
Ben Guyetano P. O. Box 3039 Mililani, HI 96789	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/11/93	1000.00
Patricia Saiki P. O. Box 4107 Honolulu, HI 96812	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/11/93	1000.00
Lorraine Inouye 215 Paukaa Drive Hilo, HI 96720	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/11/93	250.00
Kroilan Tenorio Jesus C. Borja AAA - 2275, Caller Box 1001 Saipan, MP 96950	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/1/93	200.00
Joe Pickard P. O. Box 4845 Kaneohe, HI 96744	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/1/93	100.00
Jimmy Tehada P. O. Box 265 Lawai, HI 96765	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/2/93	100.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>5850.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 5  
FOR LINE NUMBER 29

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**NAME OF COMMITTEE (In Full)** Emcorp Hawaii  
Special Political Education Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Maryanne Kusaka 5151 Nanea Road Kapaa, HI 96746	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/2/93	75.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Brian DeLima P. O. Box 10442 Eliio, HI 96721	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/2/93	100.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Danna Mercado Kim 1528 Onipaea Street Honolulu, HI 96819	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/3/93	100.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ies Ihara 719 12th Avenue Honolulu, HI 96816	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/10/93	200.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Carl T.G. Gutierrez P. O. Box 24447 CMF, Guam 96921	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/10/93	200.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Tom Okamura P. O. Box 673 Aiea, HI 96701	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/10/93	250.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Joseph Souki P. O. Box 632 Waiuku, HI 96793	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/4/93	500.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Robert Henkes P. O. Box 313 Volcano, HI 96785	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/4/93	300.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Brian Tamiguchi 2130 Armstrong Street Honolulu, HI 96822	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/4/93	200.00

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**SUB-TOTAL** of Disbursements This Page (optional) ..... **1925.00**

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







**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 5 OF 5  
FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full) **Rancorp Hawaii  
Special Political Education Committee**

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A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Tommy Tanaka/Doris Brooks P. O. Box 1115 Agana, Guam 96910	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/30/93	200.00
B. Full Name, Mailing Address and ZIP Code David Igr 98 1768 Piki Street Aiea, HI 96701	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/30/93	300.00
C. Full Name, Mailing Address and ZIP Code Jimmy Tehadu P. O. Box 265 Lawai, HI 96765	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/30/93	100.00
D. Full Name, Mailing Address and ZIP Code Alice Lee P. O. Box 1606 Kahului, HI 96732	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/1/93	100.00
E. Full Name, Mailing Address and ZIP Code Jerry Chung 2650 Kekuanoa Hilo, HI 96720	Fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/16/93	200.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

**SUBTOTAL** of Disbursements This Page (optional) ..... 900.00

**TOTAL** - This Period (last page this line number only) ..... 16,625.00

**Federal Election Commission  
ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

Hand Delivered

DATE OF RECEIPT

First Class Mail

POSTMARKED

Registered/Certified Mail

POSTMARKED

*1-28-94*

No Postmark

Postmark Illegible

Received from the House Office of Records  
and Registration

DATE OF RECEIPT

Received from the Senate Office of Public  
Records

DATE OF RECEIPT

Other (Specify):

POSTMARKED

and/or DATE OF RECEIPT

*S.E.B.*

PREPARER

*1-31-94*

DATE PREPARED

74338775279