

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 3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY ▲ STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT
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 08 / 09 / 2014 in the State of HI

(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period 07 / 01 / 2014 through 07 / 20 / 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 07 / 28 / 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.

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Stanley Chang for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2014 To: M M / D D / Y Y Y Y 07 / 20 / 2014

	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))....	21743.64	724391.58
(b) Total Contribution Refunds (from Line 20(d))	0.00	3300.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	21743.64	721091.58
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	52127.97	578884.76
(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)).....	52127.97	578859.27
8. Cash on Hand at Close of Reporting Period (from Line 27).....	179232.31	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	37000.00	

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).....	17413.95	658879.43
(ii) Unitemized.....	4329.69	53312.15
(iii) TOTAL of contributions from individuals ▶	21743.64	712191.58
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	12200.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	21743.64	724391.58
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	37000.00	37000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	37000.00	37000.00
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)..... ▶	58743.64	761417.07

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	52127.97	578884.76
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	0.00	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)).....	0.00	3300.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	52127.97	582184.76

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	172616.64
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	58743.64
25. SUBTOTAL (add Line 23 and Line 24).....	231360.28
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	52127.97
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	179232.31

**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 46
	<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)
David Austin

Mailing Address 1812 Kumakani Pl

City Honolulu State HI Zip Code 96821-1328

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

Name of Employer First American Title, 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
 07 / 19 / 2014

Transaction ID : VN8NRCTPQ62

Amount of Each Receipt this Period
 300.00

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

Mailing Address 750 Street Apt 302

City Honolulu State HI Zip Code 96817

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
 07 / 14 / 2014

Transaction ID : VN8NRCTA687

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Nina Reppun Carney

Mailing Address 632 Ulili St

City Honolulu State HI Zip Code 96816-4935

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

Name of Employer Hawaiian Airlines Occupation Flight Staff

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 02 / 2014

Transaction ID : VN8NRCS6NF1

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 6 OF 46
	<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)
Gregory S Casciato

Mailing Address 2420 Park Manor Dr

City State Zip Code
McKeesport PA 15132-1872

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

Name of Employer County of Allegheny Department of Budg
Occupation Sr. Deputy Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 16 / 2014

Transaction ID : VN8NRCTFW58

Amount of Each Receipt this Period
100.00

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

Mailing Address 3229 Diamond Head Rd

City State Zip Code
Honolulu HI 96815-4721

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

Name of Employer new york university
Occupation professor of psychiatry

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 01 / 2014

Transaction ID : VN8NRCS1M00

Amount of Each Receipt this Period
1000.00

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

Mailing Address PO Box 61455

City State Zip Code
Honolulu HI 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
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 02 / 2014

Transaction ID : VN8NRCS7NG7

Amount of Each Receipt this Period
50.00

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 7 OF 46
	<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)
Johann Frederick Cutiongco

Mailing Address 308 W 73rd St
Apt A

City State Zip Code
New York NY 10023-1663

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

Name of Employer Occupation
Kinnek Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1600.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 18 / 2014

Transaction ID : VN8NRCTNZNO

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
William R. Deuchar

Mailing Address 1777 Ala Moana Blvd
Ste 200

City State Zip Code
Honolulu HI 96815-1659

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

Name of Employer Occupation
US Pacific Development Developer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 15 / 2014

Transaction ID : VN8NRCTDNY8

Amount of Each Receipt this Period
500.00

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

Mailing Address 1549 Ipukula St

City State Zip Code
Honolulu HI 96821-1419

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

Name of Employer Occupation
N/A not employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
804.20

Date of Receipt
M M / D D / Y Y Y Y
07 / 08 / 2014

Transaction ID : VN8NRCSP9M0

Amount of Each Receipt this Period
329.84

* In-Kind: In-kind for valet service

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

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

1079.84

**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 46
	<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)
Alexis Ginn

Mailing Address 1111 Kensington Ct

City Johns Creek State GA Zip Code 30022-6274

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

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

Transaction ID : VN8NRCSGK48

Amount of Each Receipt this Period
 1500.00

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
 07 / 09 / 2014

Transaction ID : VN8NRCSPG99

Amount of Each Receipt this Period
 100.00

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

Mailing Address 1000 Bishop St
FI 15

City Honolulu State HI Zip Code 96813-4202

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

Name of Employer Cades Schutte LLP Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 20 / 2014

Transaction ID : VN8NRCTQ3M7

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 9 OF 46
	<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 **550.00**

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

Transaction ID : VN8NRCSHSD9

Amount of Each Receipt this Period
150.00

B. 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 **776.11**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 06 / 2014

Transaction ID : VN8NRCSGQ97

Amount of Each Receipt this Period
325.11

* In-Kind: Event Food and Drink

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 **785.11**

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

Transaction ID : VN8NRCSGWA5

Amount of Each Receipt this Period
9.00

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

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

484.11

**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 10 OF 46
	<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 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 Bank Of Hawaii Occupation Executive Vice 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
 07 / 06 / 2014

Transaction ID : VN8NRCSGQG2

Amount of Each Receipt this Period
250.00

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

Mailing Address 1337 Lower Campus Rd

City Honolulu State HI Zip Code 96822-2352

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

Name of Employer University of Hawaii Occupation Director of Athletics

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 08 / 2014

Transaction ID : VN8NRCSM4T0

Amount of Each Receipt this Period
500.00

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
2800.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 14 / 2014

Transaction ID : VN8NRCT94G8

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)	PAGE 11 OF 46
	<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)
Gerald Kim

Mailing Address 1441 Kapiolani Blvd
Ste 1515

City Honolulu State HI Zip Code 96814-4407

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

Name of Employer Kim Orthodontics LLC (self) Occupation Orthodontist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 18 / 2014

Transaction ID : VN8NRCTNZX1

Amount of Each Receipt this Period
500.00

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

Mailing Address 977 Kalapaki St

City Honolulu State HI Zip Code 96825-2707

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
 07 / 18 / 2014

Transaction ID : VN8NRCTNYG8

Amount of Each Receipt this Period
100.00

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

Mailing Address PO Box 10850

City Honolulu State HI Zip Code 96816-0850

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
2250.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 11 / 2014

Transaction ID : VN8NRCT7ZF1

Amount of Each Receipt this Period
250.00

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)	PAGE 12 OF 46
	<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 Loo

Mailing Address 46-485 Hulupala Pl
Apt 401

City Kaneohe State HI Zip Code 96744-4236

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

Name of Employer None Occupation MBA Student

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
201.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : VN8NRCS7NS8

Amount of Each Receipt this Period
100.00

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

Mailing Address 2436 Oahu Ave

City Honolulu State HI Zip Code 96822-1967

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

Name of Employer Straub Occupation Physician

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
 07 / 14 / 2014

Transaction ID : VN8NRCTAAJ5

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Haksoon Andrea Low

Mailing Address 1717 Mott-Smith Dr
Apt 1813

City Honolulu State HI Zip Code 96822-2830

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

Name of Employer Bervar and Jones 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
 07 / 18 / 2014

Transaction ID : VN8NRCTNQQ8

Amount of Each Receipt this Period
200.00

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

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

550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 46
	<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 B. Marcus

Mailing Address 403 Wanaao Rd

City State Zip Code
Kailua HI 96734-3440

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

Name of Employer Occupation
Starn O'Toole Marcus & Fisher 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
 07 / 11 / 2014

Transaction ID : VN8NRCT7ZA2

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Kent A. Matsuzaki

Mailing Address 5374 Kilauea Ave

City State Zip Code
Honolulu HI 96816-5615

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

Name of Employer Occupation
Economy Plumbing & Air Conditioning Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 06 / 2014

Transaction ID : VN8NRCSE5C5

Amount of Each Receipt this Period
500.00

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

Mailing Address 1413 Byrne Hall

City State Zip Code
Hanover NH 03755-9214

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

Name of Employer Occupation
Dartmouth College Teaching Assistant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 11 / 2014

Transaction ID : VN8NRCT7ZP7

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 14 OF 46
	<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)
Carol K. Muranaka

Mailing Address **PO Box 240288**

City **Honolulu** State **HI** Zip Code **96824-0288**

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
500.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 17 / 2014

Transaction ID : VN8NRCTJ646

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Eaton O'Neill

Mailing Address **99-677 Kahilina Pl Apt 606**

City **Aiea** State **HI** Zip Code **96701-3538**

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
300.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 11 / 2014

Transaction ID : VN8NRCT7ZG9

Amount of Each Receipt this Period
100.00

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

Mailing Address **98-1936 Hapaki St**

City **Aiea** State **HI** Zip Code **96701-1639**

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

Name of Employer **Linda Hagen** Occupation **Freelance Photographer**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 17 / 2014

Transaction ID : VN8NRCTGXQ9

Amount of Each Receipt this Period
500.00

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 15 OF 46
	<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)
Henry (Kitty) Ou

Mailing Address 50 S Beretania St
Ste C-211B

City Honolulu State HI Zip Code 96813-2222

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

Name of Employer United Chinese Society of Hawaii Occupation 1st vice president

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 16 / 2014

Transaction ID : VN8NRCTGR08

Amount of Each Receipt this Period
2600.00

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

Mailing Address 5230 Kuaiwi Pl

City Honolulu State HI Zip Code 96821-1560

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

Name of Employer Self Occupation Nurse Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1750.00

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

Transaction ID : VN8NRCSGPV6

Amount of Each Receipt this Period
250.00

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

Mailing Address 1115 S Elm Dr
Apt 205

City Los Angeles State CA Zip Code 90035-1132

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

Name of Employer Gordon Silver Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : VN8NRCTJPP3

Amount of Each Receipt this Period
250.00

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

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

3100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 46
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

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

Mailing Address **PO Box 30008**

City **Honolulu** State **HI** Zip Code **96820-0008**

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 **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 03 / 2014

Transaction ID : VN8NRC SBP87

Amount of Each Receipt this Period
1000.00

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

Mailing Address **4429 Sierra Dr
Apt A**

City **Honolulu** State **HI** Zip Code **96816-4053**

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

Name of Employer **Self** Occupation **Graphic Designer**

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
07 / 09 / 2014

Transaction ID : VN8NRC SPG73

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
William K. Shultz

Mailing Address **486 Luakini St**

City **Honolulu** State **HI** Zip Code **96817-1447**

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 **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 14 / 2014

Transaction ID : VN8NRCTAAC8

Amount of Each Receipt this Period
250.00

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 17 OF 46
	<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. Marshall Silver
 Full Name (Last, First, Middle Initial)
 Mailing Address 2211 Lake Rd
 Apt 501
 City Belmont State CA Zip Code 94002-3205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Apple Occupation licensing manager
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **900.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 15 / 2014
Transaction ID : VN8NRCTAT64
 Amount of Each Receipt this Period
200.00

B. Lex R. Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 2050 Lanihuli Dr
 City Honolulu State HI Zip Code 96822-2111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Kobayashi Sugita & Goda Occupation Attorney
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 01 / 2014
Transaction ID : VN8NRCS3C67
 Amount of Each Receipt this Period
500.00

C. Joseph A. Stewart
 Full Name (Last, First, Middle Initial)
 Mailing Address 1088 Bishop St
 Apt 1406
 City Honolulu State HI Zip Code 96813-3119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Kobayashi Sugita and Goda Occupation Partner
 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
 07 / 01 / 2014
Transaction ID : VN8NRCS3BS4
 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 18 OF 46
	<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 Sze

Mailing Address 217 Thompson St
Apt 216

City State Zip Code
New York NY 10012-1361

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

Name of Employer Occupation
Skadden, Arps, Slate, Meagher & Flom 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
07 / 16 / 2014

Transaction ID : VN8NRCTGDB2

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Paul H. Toyozaki

Mailing Address 1717 Mott-Smith Dr
Apt 1813

City State Zip Code
Honolulu HI 96822-2830

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

Name of Employer Occupation
Self 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
07 / 03 / 2014

Transaction ID : VN8NRCSBP53

Amount of Each Receipt this Period
250.00

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

Mailing Address 1487 Hiikala Pl
Apt 44

City State Zip Code
Honolulu HI 96816-5633

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

Name of Employer Occupation
Hawaii Assoc. of Independent Schools Executive Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 19 / 2014

Transaction ID : VN8NRCTPFV9

Amount of Each Receipt this Period
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 46
	<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)
Winnie Wong

Mailing Address 555 University Ave
2204

City Honolulu State HI Zip Code 96826-5051

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
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 10 / 2014

Transaction ID : VN8NRCSPFX4

Amount of Each Receipt this Period
100.00

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

Mailing Address 1212 Nuuanu Ave
Apt 2910

City Honolulu State HI Zip Code 96817-4036

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

Name of Employer Information Requested Occupation Information Requested
University of Hawaii Program Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2014

Transaction ID : VN8NRCTPQ38

Amount of Each Receipt this Period
200.00

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 Information Requested Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D 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).....

300.00

17413.95

**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 46
	<input type="checkbox"/> 11a 12 <input checked="" 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)
Stanley Chang

Mailing Address 637 Ulumaika St

City Honolulu State HI Zip Code 96816-5203

FEC ID number of contributing federal political committee. **C** H4HI01100

Name of Employer City and County of Honolulu Occupation City Councilmember

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 37000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : VN8NRCTPQA4

Amount of Each Receipt this Period
 37000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

37000.00

37000.00

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 21 OF 46			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

Full Name (Last, First, Middle Initial) A. Anthology Marketing Group		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 1003 Bishop St		Amount of Each Disbursement this Period 15500.00 Transaction ID : VN7PG9SKYH3
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. Regina Bailey		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 150 Hamakua Drive #759		Amount of Each Disbursement this Period 600.00 Transaction ID : VN7PG9SKY17
City Honolulu	State HI Zip Code 96816	
Purpose of Disbursement GOTV Consulting	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Demond L B Bell		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 1088 Bishop St		Amount of Each Disbursement this Period 600.00 Transaction ID : VN7PG9SKXE9
City Honolulu	State HI Zip Code 96813-3113	
Purpose of Disbursement GOTV 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:		

SUBTOTAL of Disbursements This Page (optional).....	16700.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 46	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

Full Name (Last, First, Middle Initial) A. Marya Demitruk		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 2421 Ala Wai Blvd Apt 1202		Amount of Each Disbursement this Period 90.00 Transaction ID : VN7PG9SKXV1
City Honolulu State HI Zip Code 96815-3480	Purpose of Disbursement GOTV 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. Concetta M. DiLeo		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address 1549 Ipukula St		Amount of Each Disbursement this Period 329.84 Transaction ID : VN8NRCSP9M0I
City Honolulu State HI Zip Code 96821-1419	Purpose of Disbursement In-kind for valet service 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

Full Name (Last, First, Middle Initial) c. Facebook, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 1601 Willow Rd		Amount of Each Disbursement this Period 63.26 Transaction ID : VN7PG9SKX99
City Menlo Park State CA Zip Code 94025-1452	Purpose of Disbursement Online Advertising Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	483.10
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 46	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

Full Name (Last, First, Middle Initial) A. Tammy Gautier		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 909 Ala Liliko'i St Apt 603		Amount of Each Disbursement this Period 270.00 Transaction ID : VN7PG9SKXY5
City Honolulu	State HI Zip Code 96818-2402	
Purpose of Disbursement GOTV 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. Kendra W. Ginn		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 1955 Kakela Dr Apt A		Amount of Each Disbursement this Period 390.00 Transaction ID : VN7PG9SKXZ3
City Honolulu	State HI Zip Code 96822-2156	
Purpose of Disbursement GOTV Consulting	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Taeka Haraguchi		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 311 E 50th St Apt 2H		Amount of Each Disbursement this Period 1250.00 Transaction ID : VN7PG9SKXS6
City Honolulu	State HI Zip Code 10022-7937	
Purpose of Disbursement Fundraising 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:		

SUBTOTAL of Disbursements This Page (optional).....	1910.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 46			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

Full Name (Last, First, Middle Initial) A. Taeka Haraguchi		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 311 E 50th St Apt 2H		Amount of Each Disbursement this Period 3250.00 Transaction ID : VN7PG9SKY41
City Honolulu	State HI Zip Code 10022-7937	
Purpose of Disbursement Fundraising 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. Harland Clarke Check Orders		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 10931 Laureate Dr		Amount of Each Disbursement this Period 25.85 Transaction ID : VN7PG9SKYC4
City San Antonio	State TX Zip Code 78249-3312	
Purpose of Disbursement Checks	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Hawaiian Electric		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 900 Richards St		Amount of Each Disbursement this Period 246.24 Transaction ID : VN7PG9SMT40
City Honolulu	State HI Zip Code 96813-2956	
Purpose of Disbursement Electricity	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:		

SUBTOTAL of Disbursements This Page (optional).....	3522.09
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 46			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

Full Name (Last, First, Middle Initial) A. Hawaiian Telecom		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 1177 Bishop St		Amount of Each Disbursement this Period 281.66 Transaction ID : VN7PG9SKY25
City Honolulu State HI Zip Code 96813-2837	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:	Phones

Full Name (Last, First, Middle Initial) B. Jocelyn Idriss		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 1717 Alencastre St		Amount of Each Disbursement this Period 1000.00 Transaction ID : VN7PG9SKXQ0
City Honolulu State HI Zip Code 96816-1942	Purpose of Disbursement GOTV 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) c. Jocelyn Idriss		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 1717 Alencastre St		Amount of Each Disbursement this Period 1250.00 Transaction ID : VN7PG9SMEB1
City Honolulu State HI Zip Code 96816-1942	Purpose of Disbursement GOTV 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:	

SUBTOTAL of Disbursements This Page (optional).....	2531.66
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 46	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

Full Name (Last, First, Middle Initial) A. Jocelyn Idriss		Date of Disbursement MM / DD / YYYY 07 / 02 / 2014
Mailing Address 1717 Alencastre St		Amount of Each Disbursement this Period 92.91
City Honolulu	State HI Zip Code 96816-1942	
Purpose of Disbursement Reimbursement - Office Supplies and Food		Transaction ID : VN7PG9SMEC9
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)	Category/ Type 001
State: District:		

Full Name (Last, First, Middle Initial) B. Aina Haina Gas Station		Date of Disbursement MM / DD / YYYY 06 / 04 / 2014
Mailing Address 830 W Hind Dr		Amount of Each Disbursement this Period 20.35
City Honolulu	State HI Zip Code 96821-1838	
Purpose of Disbursement Gas		Transaction ID : VN7PG9SMG17
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)	Category/ Type 001
State: District:		
		[MEMO ITEM] *

Full Name (Last, First, Middle Initial) C. Costco		Date of Disbursement MM / DD / YYYY 06 / 06 / 2014
Mailing Address PO Box 34331		Amount of Each Disbursement this Period 52.32
City Seattle	State WA Zip Code 98124-1331	
Purpose of Disbursement Gas		Transaction ID : VN7PG9SMG09
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)	Category/ Type 001
State: District:		
		[MEMO ITEM] *

SUBTOTAL of Disbursements This Page (optional).....	92.91
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 46	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

Full Name (Last, First, Middle Initial) A. Longs Drug Stores		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2014
Mailing Address 141 N Civic Dr		Amount of Each Disbursement this Period 325.11
City Walnut Creek State CA Zip Code 94596-3815	Purpose of Disbursement 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:	Transaction ID : VN7PG9SMFZ1 [MEMO ITEM] *

Full Name (Last, First, Middle Initial) B. Longs Drug Stores		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address 141 N Civic Dr		Amount of Each Disbursement this Period 4.19
City Walnut Creek State CA Zip Code 94596-3815	Purpose of Disbursement 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:	Transaction ID : VN7PG9SMFY4 [MEMO ITEM] *

Full Name (Last, First, Middle Initial) c. Louise K.Y. Ing		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2014
Mailing Address 1080 S Beretania St Apt 504		Amount of Each Disbursement this Period 325.11
City Honolulu State HI Zip Code 96814-1447	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:	Transaction ID : VN8NRCSGQ971 * In-Kind Received

SUBTOTAL of Disbursements This Page (optional).....	325.11
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 46			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

Full Name (Last, First, Middle Initial) A. Bryan M. Jackson		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 1946 Ala Moana Blvd Apt 324		Amount of Each Disbursement this Period 560.00 Transaction ID : VN7PG9SKXP2
City Honolulu State HI Zip Code 96815-1103	Purpose of Disbursement GOTV 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. Lawrence Maneafaiga-Cunningham		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 86-131 Kwame Road		Amount of Each Disbursement this Period 400.00 Transaction ID : VN7PG9SKXX7
City Waianae State HI Zip Code 96816	Purpose of Disbursement GOTV 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) c. Manoa Marketplace, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 2851 E Manoa Rd		Amount of Each Disbursement this Period 3141.36 Transaction ID : VN7PG9SKY33
City Honolulu State HI Zip Code 96822-1858	Purpose of Disbursement Office Rent 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:	

SUBTOTAL of Disbursements This Page (optional).....	4101.36
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 46			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

Full Name (Last, First, Middle Initial) A. Alina C Meltaus			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 708 Columbia Rd NW			Amount of Each Disbursement this Period 1250.00 Transaction ID : VN7PG9SKXH2
City Washington	State DC	Zip Code 20001-3802	
Purpose of Disbursement Fundraising 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. Alina C Meltaus			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 708 Columbia Rd NW			Amount of Each Disbursement this Period 1250.00 Transaction ID : VN7PG9SKYA8
City Washington	State DC	Zip Code 20001-3802	
Purpose of Disbursement Fundraising 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) c. Alina C Meltaus			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 708 Columbia Rd NW			Amount of Each Disbursement this Period 504.61 Transaction ID : VN7PG9SKYB6
City Washington	State DC	Zip Code 20001-3802	
Purpose of Disbursement Reimbursement - Office Supplies and Gas		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:	

SUBTOTAL of Disbursements This Page (optional).....	3004.61
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 46	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

Full Name (Last, First, Middle Initial) A. 7 Eleven		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 1722 Routh St Ste 1000		Amount of Each Disbursement this Period 83.74
City Dallas	State TX	
Zip Code 75201-2504	Purpose of Disbursement Gas	Transaction ID : VN7PG9SNS2
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)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Longs Drug Stores		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 141 N Civic Dr		Amount of Each Disbursement this Period 15.68
City Walnut Creek	State CA	
Zip Code 94596-3815	Purpose of Disbursement Office Supplies	Transaction ID : VN7PG9SNSK4
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)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) c. Manoa Service, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 2927 E Manoa Rd		Amount of Each Disbursement this Period 30.01
City Honolulu	State HI	
Zip Code 96822-1803	Purpose of Disbursement Gas	Transaction ID : VN7PG9SNSH8
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)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 46	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

Full Name (Last, First, Middle Initial) A. Manoa Service, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 2927 E Manoa Rd		Amount of Each Disbursement this Period 40.00
City Honolulu	State HI Zip Code 96822-1803	
Purpose of Disbursement Gas	Candidate Name	Transaction ID : VN7PG9SNSJ6
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] *

Full Name (Last, First, Middle Initial) B. Manoa Service, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 2927 E Manoa Rd		Amount of Each Disbursement this Period 25.21
City Honolulu	State HI Zip Code 96822-1803	
Purpose of Disbursement Gas	Candidate Name	Transaction ID : VN7PG9SNSV7
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] *

Full Name (Last, First, Middle Initial) c. Manoa Service, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 2927 E Manoa Rd		Amount of Each Disbursement this Period 22.79
City Honolulu	State HI Zip Code 96822-1803	
Purpose of Disbursement Gas	Candidate Name	Transaction ID : VN7PG9SNT72
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] *

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 46			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

Full Name (Last, First, Middle Initial) A. Manoa Service, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 2927 E Manoa Rd		Amount of Each Disbursement this Period 20.02
City Honolulu	State HI Zip Code 96822-1803	
Purpose of Disbursement Gas	Candidate Name	Transaction ID : VN7PG9SNT80
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] *

Full Name (Last, First, Middle Initial) B. Manoa Service, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 2927 E Manoa Rd		Amount of Each Disbursement this Period 35.01
City Honolulu	State HI Zip Code 96822-1803	
Purpose of Disbursement Gas	Candidate Name	Transaction ID : VN7PG9SNT98
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] *

Full Name (Last, First, Middle Initial) c. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 6600 N Military Trl		Amount of Each Disbursement this Period 204.65
City Boca Raton	State FL Zip Code 33496-2434	
Purpose of Disbursement Office Supplies	Candidate Name	Transaction ID : VN7PG9SNSN0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM] *

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 46			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

Full Name (Last, First, Middle Initial) A. Sheraton Waikiki		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 2255 Kalakaua Ave		Amount of Each Disbursement this Period 27.50
City Honolulu	State HI Zip Code 96815-2515	
Purpose of Disbursement Parking Fee	Category/Type 007	Transaction ID : VN7PG9SNYP0
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. Aaron R. Miller		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 1914 University Ave Apt 208		Amount of Each Disbursement this Period 1000.00
City Honolulu	State HI Zip Code 96822-2473	
Purpose of Disbursement Media Consulting	Category/Type 001	Transaction ID : VN7PG9SKXJ0
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Aaron R. Miller		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 1914 University Ave Apt 208		Amount of Each Disbursement this Period 1000.00
City Honolulu	State HI Zip Code 96822-2473	
Purpose of Disbursement Media Consulting	Category/Type 001	Transaction ID : VN7PG9SMT34
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 46			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

Full Name (Last, First, Middle Initial) A. Solomon Navarro		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 1419A Akiikii PI		Amount of Each Disbursement this Period 630.00 Transaction ID : VN7PG9SKXT4
City Kailua	State HI Zip Code 96734-4285	
Purpose of Disbursement GOTV 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. NGP VAN, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 8 Grove Street Suite 202		Amount of Each Disbursement this Period 1159.43 Transaction ID : VN7PG9SMEA3
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:		

Full Name (Last, First, Middle Initial) C. NGP VAN, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 8 Grove Street Suite 202		Amount of Each Disbursement this Period 1650.00 Transaction ID : VN7PG9SMEZ9
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:		

SUBTOTAL of Disbursements This Page (optional).....	3439.43
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 46			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

Full Name (Last, First, Middle Initial) A. NGP VAN, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 8 Grove Street Suite 202		Amount of Each Disbursement this Period 375.00 Transaction ID : VN7PG9SMF07
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:		

Full Name (Last, First, Middle Initial) B. Shane J K Nuuhiwa		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 3028 Makini St		Amount of Each Disbursement this Period 400.00 Transaction ID : VN7PG9SKXN4
City Honolulu State HI Zip Code 96815-4244	Purpose of Disbursement GOTV 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) c. Robyn Oishi		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 1114 11th Ave Apt A		Amount of Each Disbursement this Period 320.00 Transaction ID : VN7PG9SKXW9
City Honolulu State HI Zip Code 96816-2476	Purpose of Disbursement GOTV 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:		

SUBTOTAL of Disbursements This Page (optional).....	1095.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 46			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

Full Name (Last, First, Middle Initial) A. Dianne Quiambau		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 87-135 Kaukamana Rd Apt B		Amount of Each Disbursement this Period 400.00 Transaction ID : VN7PG9SKXK8
City Waianae State HI Zip Code 96792-4536	Purpose of Disbursement GOTV 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. James Rigdon		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 1816 Dole St		Amount of Each Disbursement this Period 2000.00 Transaction ID : VN7PG9SKXG5
City Honolulu State HI Zip Code 96822-3300	Purpose of Disbursement GOTV 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) c. James Rigdon		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 1816 Dole St		Amount of Each Disbursement this Period 2000.00 Transaction ID : VN7PG9SKYD2
City Honolulu State HI Zip Code 96822-3300	Purpose of Disbursement GOTV 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:	

SUBTOTAL of Disbursements This Page (optional).....	4400.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 46	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

Full Name (Last, First, Middle Initial) A. James Rigdon		Date of Disbursement MM / DD / YYYY 07 / 15 / 2014
Mailing Address 1816 Dole St		Amount of Each Disbursement this Period 448.25 Transaction ID : VN7PG9SKYF7
City Honolulu	State HI Zip Code 96822-3300	
Purpose of Disbursement Reimbursement - Office Supplies and Gas		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. 7 Eleven		Date of Disbursement MM / DD / YYYY 07 / 03 / 2014
Mailing Address 1722 Routh St Ste 1000		Amount of Each Disbursement this Period 20.00 Transaction ID : VN7PG9SMK47
City Dallas	State TX Zip Code 75201-2504	
Purpose of Disbursement Gas		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:		

[MEMO ITEM]
*

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement MM / DD / YYYY 07 / 03 / 2014
Mailing Address 208 S Akard St		Amount of Each Disbursement this Period 256.12 Transaction ID : VN7PG9SMK55
City Dallas	State TX Zip Code 75202-4295	
Purpose of Disbursement Phones		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:		

[MEMO ITEM]
*

SUBTOTAL of Disbursements This Page (optional).....	448.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 46			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 208 S Akard St		Amount of Each Disbursement this Period 47.12
City Dallas State TX Zip Code 75202-4295	Purpose of Disbursement Phones 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)	Transaction ID : VN7PG9SMK63 [MEMO ITEM] *
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) B. Manoa Service, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 2927 E Manoa Rd		Amount of Each Disbursement this Period 50.00
City Honolulu State HI Zip Code 96822-1803	Purpose of Disbursement Gas 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)	Transaction ID : VN7PG9SMK06 [MEMO ITEM] *
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) c. Manoa Service, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 2927 E Manoa Rd		Amount of Each Disbursement this Period 15.00
City Honolulu State HI Zip Code 96822-1803	Purpose of Disbursement Gas 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)	Transaction ID : VN7PG9SMK22 [MEMO ITEM] *
State: District:	Category/Type 001	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 46			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

Full Name (Last, First, Middle Initial) A. Manoa Service, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 2927 E Manoa Rd		Amount of Each Disbursement this Period 40.00
City Honolulu	State HI Zip Code 96822-1803	
Purpose of Disbursement Gas	Category/Type 001	Transaction ID : VN7PG9SMK39
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. Tesoro Corporation		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 19100 Ridgewood Pkwy		Amount of Each Disbursement this Period 20.01
City San Antonio	State TX Zip Code 78259-1834	
Purpose of Disbursement Gas	Category/Type 001	Transaction ID : VN7PG9SMK71
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) c. SakaMai		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address 157 Ludlow St		Amount of Each Disbursement this Period 502.61
City New York	State NY Zip Code 10002-2290	
Purpose of Disbursement Event Venue, Food and Drink	Category/Type 007	Transaction ID : VN7PG9SKY09
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	502.61
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 46			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

Full Name (Last, First, Middle Initial) A. Steven Toomey		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 45-166 Lilipuna Rd		Amount of Each Disbursement this Period 390.00 Transaction ID : VN7PG9SKXR8
City Kaneohe State HI Zip Code 96744-3023	Purpose of Disbursement GOTV 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. Don Weigel		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 7910 Michael Rd		Amount of Each Disbursement this Period 3000.00 Transaction ID : VN7PG9SKXD1
City Orchard Park State NY Zip Code 14127-1464	Purpose of Disbursement Political Strategy 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) c. Don Weigel		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 7910 Michael Rd		Amount of Each Disbursement this Period 3000.00 Transaction ID : VN7PG9SKY58
City Orchard Park State NY Zip Code 14127-1464	Purpose of Disbursement Political Strategy 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:	

SUBTOTAL of Disbursements This Page (optional).....	6390.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 46	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

Full Name (Last, First, Middle Initial) A. Don Weigel		Date of Disbursement MM / DD / YYYY 07 / 15 / 2014
Mailing Address 7910 Michael Rd		Amount of Each Disbursement this Period 744.83 Transaction ID : VN7PG9SKY66
City Orchard Park	State NY Zip Code 14127-1464	
Purpose of Disbursement Office Supplies	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. Best Buy		Date of Disbursement MM / DD / YYYY 07 / 11 / 2014
Mailing Address 7601 Penn Ave S		Amount of Each Disbursement this Period 77.46 Transaction ID : VN7PG9SMJG9
City Richfield	State MN Zip Code 55423-3683	
Purpose of Disbursement Office Supplies	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:		

[MEMO ITEM]
*

Full Name (Last, First, Middle Initial) c. Best Buy		Date of Disbursement MM / DD / YYYY 07 / 11 / 2014
Mailing Address 7601 Penn Ave S		Amount of Each Disbursement this Period 39.78 Transaction ID : VN7PG9SMJH7
City Richfield	State MN Zip Code 55423-3683	
Purpose of Disbursement Office Supplies	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:		

[MEMO ITEM]
*

SUBTOTAL of Disbursements This Page (optional).....	744.83
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 46			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

Full Name (Last, First, Middle Initial) A. Longs Drug Stores		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 141 N Civic Dr		Amount of Each Disbursement this Period 6.20
City Walnut Creek	State CA	
Zip Code 94596-3815	Purpose of Disbursement Office Supplies	Transaction ID : VN7PG9SMJX2
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)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. Safeway		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 5918 Stoneridge Mall Rd		Amount of Each Disbursement this Period 147.00
City Pleasanton	State CA	
Zip Code 94588-3229	Purpose of Disbursement Office Supplies	Transaction ID : VN7PG9SMJY0
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)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) c. Safeway		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 5918 Stoneridge Mall Rd		Amount of Each Disbursement this Period 62.61
City Pleasanton	State CA	
Zip Code 94588-3229	Purpose of Disbursement Office Supplies	Transaction ID : VN7PG9SMJZ8
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)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 46	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

Full Name (Last, First, Middle Initial) A. Target		Date of Disbursement MM / DD / YYYY 07 / 11 / 2014
Mailing Address 900 Nicollet Mall		Amount of Each Disbursement this Period 137.88
City Minneapolis	State MN	
Zip Code 55403-2530	Purpose of Disbursement Office Supplies	Transaction ID : VN7PG9SMJ11
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)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) B. United Parcel Service		Date of Disbursement MM / DD / YYYY 07 / 11 / 2014
Mailing Address 55 Glenlake Pkwy		Amount of Each Disbursement this Period 196.00
City Atlanta	State GA	
Zip Code 30328-3474	Purpose of Disbursement Postage/Shipping	Transaction ID : VN7PG9SMJW4
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)	[MEMO ITEM] *
State: District:		

Full Name (Last, First, Middle Initial) C. Wal-Mart		Date of Disbursement MM / DD / YYYY 07 / 11 / 2014
Mailing Address 700 Keeaumoku St		Amount of Each Disbursement this Period 31.16
City Honolulu	State HI	
Zip Code 96814-3014	Purpose of Disbursement Office Supplies	Transaction ID : VN7PG9SMJ37
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)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 46	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

Full Name (Last, First, Middle Initial) A. Wal-Mart		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 700 Keeaumoku St		Amount of Each Disbursement this Period 31.16
City Honolulu	State HI Zip Code 96814-3014	
Purpose of Disbursement Office Supplies	Category/Type 001	Transaction ID : VN7PG9SMJ52
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. Wal-Mart		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 700 Keeaumoku St		Amount of Each Disbursement this Period 15.58
City Honolulu	State HI Zip Code 96814-3014	
Purpose of Disbursement Office Supplies	Category/Type 001	Transaction ID : VN7PG9SMJ86
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) c. Alyssa Wieting		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 3254 Paty Dr		Amount of Each Disbursement this Period 200.00
City Honolulu	State HI Zip Code 96822-1438	
Purpose of Disbursement GOTV Consulting	Category/Type 001	Transaction ID : VN7PG9SKXB5
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 46	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Stanley Chang for Congress

Full Name (Last, First, Middle Initial) A. Alyssa Wieting		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 3254 Paty Dr		Amount of Each Disbursement this Period 20.03
City Honolulu	State HI Zip Code 96822-1438	
Purpose of Disbursement Reimbursement - Gas	Category/Type 001	Transaction ID : VN7PG9SMFB3
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Manoa Service, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 2927 E Manoa Rd		Amount of Each Disbursement this Period 20.03
City Honolulu	State HI Zip Code 96822-1803	
Purpose of Disbursement Gas	Category/Type 001	Transaction ID : VN7PG9SMFA6
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	20.03
TOTAL This Period (last page this line number only).....	51910.99

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VN8NRCTPQA4L

Stanley Chang for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

Stanley Chang

Primary
 General
 Other (specify) ▼

Mailing Address
637 Ulumaika St

City State ZIP Code
Honolulu HI 96816-5203

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
37000.00	0.00	37000.00

TERMS

Date Incurred: M 07 / D 17 / Y 2014
 Date Due: M / D / Y none
 Interest Rate: none % (apr)
 Secured: Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	37000.00
TOTALS This Period (last page in this line only).....	▶	37000.00

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