

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

State of Hawaii Organization of Police Officers (SHOPO Political Action Fund)

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="209033.86"/>	<input type="text" value="209033.86"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="213467.48"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="4316.18"/>	<input type="text" value="13699.80"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="217783.66"/>	<input type="text" value="222733.66"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="36094.24"/>	<input type="text" value="41044.24"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="181689.42"/>	<input type="text" value="181689.42"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

State of Hawaii Organization of Police Officers (SHOPO Political Action Fund)

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized	4309.25	12966.75
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	4309.25	12966.75
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	4309.25	12966.75
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	6.93	733.05
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	4316.18	13699.80
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	4316.18	13699.80

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	2094.24	6644.24
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2094.24	6644.24
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	34000.00	34400.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	36094.24	41044.24
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	36094.24	41044.24

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	4309.25	12966.75
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4309.25	12966.75
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2094.24	6644.24
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2094.24	6644.24

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)

State of Hawaii Organization of Police Officers (SHOPO Political Action Fund)

Full Name (Last, First, Middle Initial)

A. Wikoff Combs & Co., LLC

Mailing Address 1001 Bishop Street
Suite 2760

City Honolulu

State HI

Zip Code 96819-3125

Purpose of Disbursement Prof services Acctg and Tax matters

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
08		30		2016

FEC Identification Number

C

Transaction ID : SB21B.4685

Amount of Each Disbursement this Period

2094.24

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

--

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

--

Memo Item

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

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

2094.24

2094.24

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)

State of Hawaii Organization of Police Officers (SHOPO Political Action Fund)

Full Name (Last, First, Middle Initial)

A. Agustin, Jaci, , ,

Mailing Address PMB# 196 98-1277 Kaahumanu Street

City Aiea State HI Zip Code 96701

Purpose of Disbursement
Local Election-Oahu Political contributions

011
Category/ Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		22		2016

FEC Identification Number

C
Transaction ID : SB29.4635
Amount of Each Disbursement this Period
2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Arin, Lisa, , ,

Mailing Address P.O. Box 1916

City Kapaa State HI Zip Code 96746

Purpose of Disbursement
Local Election - Kauai Pol Contr

010
Category/ Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		22		2016

FEC Identification Number

C
Transaction ID : SB29.4665
Amount of Each Disbursement this Period
2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Brun, Arthur, , ,

Mailing Address P.O. Box 352

City Kekaha State HI Zip Code 96752

Purpose of Disbursement
Local election - Oahu Political contr

011
Category/ Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: HI District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		22		2016

FEC Identification Number

C
Transaction ID : SB29.4655
Amount of Each Disbursement this Period
500.00

Memo Item

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

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

4500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)

State of Hawaii Organization of Police Officers (SHOPO Political Action Fund)

Full Name (Last, First, Middle Initial)

A. Caldwell , Kirkk , ,

Mailing Address P.O. Box 61208

City
Honolulu

State
HI

Zip Code
96839

Purpose of Disbursement
Local Election-Oahu political contributions

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	22	/	2016

FEC Identification Number

C

Transaction ID : SB29.4643

Amount of Each Disbursement this Period

4000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Chang, Stanley , ,

Mailing Address 637 Ulumaika Street

City
Honolulu

State
HI

Zip Code
96816

Purpose of Disbursement
Local Election-Oahu Political contributions

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify)

State: HI District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	22	/	2016

FEC Identification Number

C

Transaction ID : SB29.4646

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Chung, Aaron , ,

Mailing Address 494 Kilou Place

City
Hilo

State
ID

Zip Code
96720

Purpose of Disbursement
Local Election Political Contribution

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	22	/	2016

FEC Identification Number

C

Transaction ID : SB29.4625

Amount of Each Disbursement this Period

500.00

Memo Item

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

6500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)

State of Hawaii Organization of Police Officers (SHOPO Political Action Fund)

Full Name (Last, First, Middle Initial)

A. Couch, Don, , ,

Mailing Address P.O. Box 1212

City Kihei State HI Zip Code 96753

Purpose of Disbursement Local Election - Maui Pol Contr

Category/
Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2016

FEC Identification Number

Transaction ID : SB29.4674
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Crivello, Stacy, Helm, ,

Mailing Address P.O. Box 1097

City Kaunakakai State HI Zip Code 96748

Purpose of Disbursement Local Election - Political Contribution - Kauai

Category/
Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2016

FEC Identification Number

Transaction ID : SB29.4672
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. David, Maile, , ,

Mailing Address 86-4310 Mamalahoa Hwy

City Captain Cook State HI Zip Code 96704

Purpose of Disbursement Local Election -HI political contribution

Category/
Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2016

FEC Identification Number

Transaction ID : SB29.4627
 Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)

State of Hawaii Organization of Police Officers (SHOPO Political Action Fund)

Full Name (Last, First, Middle Initial)

A. Decoite, Lynn, , ,

Mailing Address P.O. Box 52

City
Kaunakakai

State
HI

Zip Code
96748

Purpose of Disbursement
Local Election - Maui Pol Contr

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		22		2016

FEC Identification Number

C

Transaction ID : SB29.4676

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Eoff, Karen, , ,

Mailing Address P.O. Box 1602

City
Kailua-Kona

State
HI

Zip Code
96745

Purpose of Disbursement
Local Election- HI political Contributions

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2106
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		22		2016

FEC Identification Number

C

Transaction ID : SB29.4629

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Fevella, Kurt, , ,

Mailing Address 91-941 Ikulani Street

City
Ewa Beach

State
HI

Zip Code
96706

Purpose of Disbursement
Local Election -Oahu Political contr

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		22		2016

FEC Identification Number

C

Transaction ID : SB29.4648

Amount of Each Disbursement this Period

2000.00

Memo Item

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

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)

State of Hawaii Organization of Police Officers (SHOPO Political Action Fund)

Full Name (Last, First, Middle Initial)

A. Greene, Madeline, , ,

Mailing Address P.O. Box 513

City
Pahoa

State
ID

Zip Code
96778

Purpose of Disbursement
Local Election political contribution

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	22	/	2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.4623

Amount of Each Disbursement this Period

[REDACTED] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Guzman, Don, , ,

Mailing Address 46 Kamaiki Circle

City
Kahului

State
HI

Zip Code
96732

Purpose of Disbursement
Local Election - Kauai Political contr

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	22	/	2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.4668

Amount of Each Disbursement this Period

[REDACTED] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Jeremiah, Bryan, , ,

Mailing Address P.O. Box 2487

City
Ewa Beach

State
HI

Zip Code
96706

Purpose of Disbursement
Local Election- Oahu Political Contributions

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	22	/	2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.4637

Amount of Each Disbursement this Period

[REDACTED] 2000.00

Memo Item

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

[REDACTED] 3000.00

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

[REDACTED]

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)

State of Hawaii Organization of Police Officers (SHOPO Political Action Fund)

Full Name (Last, First, Middle Initial) A. Kaneshiro , Arryl, , ,		Date of Disbursement MM / DD / YYYY 09 / 22 / 2016	
Mailing Address 4550 Ehiku Street		FEC Identification Number C [REDACTED] Transaction ID : SB29.4656 Amount of Each Disbursement this Period 500.00	
City Lihue	State HI	Zip Code 96766	Category/Type 011
Purpose of Disbursement Local election-Kauai political contribution		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Kawakami, Derek, , ,		Date of Disbursement MM / DD / YYYY 09 / 22 / 2016	
Mailing Address P.O.Box 3136		FEC Identification Number C [REDACTED] Transaction ID : SB29.4654 Amount of Each Disbursement this Period 500.00	
City Lihue	State HI	Zip Code 96766	Category/Type 011
Purpose of Disbursement Local Election-Political contribution		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: HI District:			

Full Name (Last, First, Middle Initial) C. Kouchi, Ronald, , ,		Date of Disbursement MM / DD / YYYY 09 / 22 / 2016	
Mailing Address P.O.Box 983		FEC Identification Number C [REDACTED] Transaction ID : SB29.4688 Amount of Each Disbursement this Period 2000.00	
City Lawai	State HI	Zip Code 96765	Category/Type 010
Purpose of Disbursement Local Election-Kauai Pol Contr		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)

State of Hawaii Organization of Police Officers (SHOPO Political Action Fund)

Full Name (Last, First, Middle Initial)

A. Kualii, Kipukai, , ,

Mailing Address P.O. Box 30910

City
Anahola

State
HI

Zip Code
96703

Purpose of Disbursement
Local Election - Kauai Pol Contr

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	2		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.4691

Amount of Each Disbursement this Period

[REDACTED] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Loy, Sue, Lee, ,

Mailing Address 498 Auwae Road

City
Hilo

State
ID

Zip Code
96720

Purpose of Disbursement
Local Election Political Contribution

011

Category/
Type

Candidate Name

Friends of Kirk Caldwell, , , ,

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify)

State: HI District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	2		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.4615

Amount of Each Disbursement this Period

[REDACTED] 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. McDermott, Bob, , ,

Mailing Address 91-982 Ololani Street

City
Ewa Beach

State
HI

Zip Code
96706

Purpose of Disbursement
Local Election - Oahu Pol Contr

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: HI District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	2		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.4678

Amount of Each Disbursement this Period

[REDACTED] 2000.00

Memo Item

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

[REDACTED] 3500.00

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

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
State of Hawaii Organization of Police Officers (SHOPO Political Action Fund)

Full Name (Last, First, Middle Initial) A. Mizuno, John, , ,		Date of Disbursement MM / DD / YYYY 09 / 22 / 2016	
Mailing Address P.O. Box 215		FEC Identification Number C [REDACTED] Transaction ID : SB29.4633 Amount of Each Disbursement this Period 500.00	
City Honolulu	State HI	Zip Code 96810	Category/ Type 011
Purpose of Disbursement Local Election - Oahu political contribution			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Morikawa, Daynette, , ,		Date of Disbursement MM / DD / YYYY 09 / 22 / 2016	
Mailing Address P.O.Box 92		FEC Identification Number C [REDACTED] Transaction ID : SB29.4663 Amount of Each Disbursement this Period 500.00	
City Lihue	State HI	Zip Code 96766	Category/ Type 011
Purpose of Disbursement Local Election -0Kauai Political contr			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) C. Nakamura, Nadine, , ,		Date of Disbursement MM / DD / YYYY 09 / 22 / 2016	
Mailing Address 4849 Iiwi Road		FEC Identification Number C [REDACTED] Transaction ID : SB29.4659 Amount of Each Disbursement this Period 500.00	
City Kapaa	State HI	Zip Code 96746	Category/ Type 011
Purpose of Disbursement Local election - Kauai political Contr			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)

State of Hawaii Organization of Police Officers (SHOPO Political Action Fund)

Full Name (Last, First, Middle Initial)

A. Raposo, Mel, , ,

Mailing Address 272 Makani Road

City
Kapaa

State
HI

Zip Code
96766

Purpose of Disbursement
Local election Political Contribution - Kauai

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: HI District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		22		2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.4658

Amount of Each Disbursement this Period

[REDACTED] 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Regan, Keith, , ,

Mailing Address 1823 Wells Street

City
Wailuku

State
HI

Zip Code
96793

Purpose of Disbursement
Local election - Maui Pol Contr

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		26		2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.4681

Amount of Each Disbursement this Period

[REDACTED] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Richards, Tim, , ,

Mailing Address P.O. Box 6741

City
Kamuela

State
HI

Zip Code
96743

Purpose of Disbursement
Local Election - HI Pol Contr

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		11		2016

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.4683

Amount of Each Disbursement this Period

[REDACTED] 500.00

Memo Item

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

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

[REDACTED] 2000.00

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
State of Hawaii Organization of Police Officers (SHOPO Political Action Fund)

A. Sugimura, Yuki, Lei, ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 901362

City Kula State ID Zip Code 96790

Purpose of Disbursement Local Election -Maui Pol Contr

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement 07 / 26 / 2016

FEC Identification Number C

Transaction ID : SB29.4679

Amount of Each Disbursement this Period 500.00

Memo Item

B. Tokioka, Kunane, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2512 Kanio Road

City Lihue State HI Zip Code 96766

Purpose of Disbursement Local election - Kauai Political Contr

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement 09 / 22 / 2016

FEC Identification Number C

Transaction ID : SB29.4661

Amount of Each Disbursement this Period 1000.00

Memo Item

C. Tupola, Andria, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4355 Lawehana Street # 6

City Honolulu State HI Zip Code 96818

Purpose of Disbursement Local Election - Oahu Political Contributions

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement 09 / 22 / 2016

FEC Identification Number C

Transaction ID : SB29.4639

Amount of Each Disbursement this Period 2000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3500.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)

State of Hawaii Organization of Police Officers (SHOPO Political Action Fund)

Full Name (Last, First, Middle Initial)

A. White, Michael, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Mailing Address P.O. Box 1798

City Makawao State HI Zip Code 96768

FEC Identification Number

C []

Transaction ID : SB29.4670
Amount of Each Disbursement this Period

[] 500.00

Purpose of Disbursement
Local election - Maui Pol Contr

011
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

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

Mailing Address

City State Zip Code

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Purpose of Disbursement

[]
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For:
 Primary General
 Other (specify)

Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

City State Zip Code

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Purpose of Disbursement

[]
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

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

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

[] 500.00

[] 34000.00