

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines.

12FE4M5

Stanley Chang for Congress

ADDRESS (number and street) 637 Ulumaika Street

Check if different than previously reported. (ACC)

Honolulu

HI

96816

2. **FEC IDENTIFICATION NUMBER** ▼

C C00540468

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)

HI

01

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on MM / DD / YYYY

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on MM / DD / YYYY

in the State of

5. Covering Period

MM / DD / YYYY  
01 / 01 / 2013

through

MM / DD / YYYY  
03 / 31 / 2013

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 Nathan Okubo

Signature of Treasurer Nathan Okubo

[Electronically Filed]

Date

MM / DD / YYYY  
04 / 12 / 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3  
(Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Stanley Chang for Congress**

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

|   | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)   |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e))....   | 25651.79                | 25651.79                           |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....   | 0.00                    | 0.00                               |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)).....                            | 25651.79                | 25651.79                           |
| 7. Net Operating Expenditures   |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....  | 2396.71                 | 2396.71                            |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14).....  | 0.00                    | 0.00                               |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)).....                                      | 2396.71                 | 2396.71                            |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27).....   | 23255.08                |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D).....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D)..... | 0.00                    |                                    |

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Stanley Chang for Congress**

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

| I. RECEIPTS   | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|---|-------------------------------|------------------------------------|
| 11. CONTRIBUTIONS (other than loans) FROM:  |                               |                                    |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                    |
| (i) Itemized (use Schedule A).....  | 22876.79                      | 22876.79                           |
| (ii) Unitemized.....  | 2775.00                       | 2775.00                            |
| (iii) TOTAL of contributions from individuals ▶   | 25651.79                      | 25651.79                           |
| (b) Political Party Committees.....   | 0.00                          | 0.00                               |
| (c) Other Political Committees (such as PACs).....  | 0.00                          | 0.00                               |
| (d) The Candidate.....  | 0.00                          | 0.00                               |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..              | 25651.79                      | 25651.79                           |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....  | 0.00                          | 0.00                               |
| 13. LOANS:  |                               |                                    |
| (a) Made or Guaranteed by the Candidate.....  | 0.00                          | 0.00                               |
| (b) All Other Loans.....  | 0.00                          | 0.00                               |
| (c) TOTAL LOANS (add Lines 13(a) and (b)).....  | 0.00                          | 0.00                               |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....                                | 0.00                          | 0.00                               |
| 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)..... ▶ | 25651.79                      | 25651.79                           |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. DISBURSEMENTS  | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....  | 2396.71                       | 2396.71                            |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 0.00                               |
| 19. LOAN REPAYMENTS:   |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 0.00                               |
| (b) Of All Other Loans .....   | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:   |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 0.00                          | 0.00                               |
| (b) Political Party Committees.....  | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs).....                        | 0.00                          | 0.00                               |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 0.00                          | 0.00                               |
| 21. OTHER DISBURSEMENTS .....  | 0.00                          | 0.00                               |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 2396.71                       | 2396.71                            |

**III. CASH SUMMARY**

|   |          |
|---|----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 0.00     |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 25651.79 |
| 25. SUBTOTAL (add Line 23 and Line 24).....   | 25651.79 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 2396.71  |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 23255.08 |

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

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

FOR LINE NUMBER: PAGE 5 OF 17  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

**A.** Full Name (Last, First, Middle Initial)  
**Makana Anicas**

Mailing Address 3901 Nioi Place

City Honolulu State HI Zip Code 96816

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

Name of Employer Lockheed Martin Corporation Occupation Business Development

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2013

**Transaction ID : SA11AI.4138**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 30 Columbia Place Apt. A22

City Brooklyn State NY Zip Code 11201

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

Name of Employer Friedman Kaplan Seiler 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 Y Y  
 03 / 14 / 2013

**Transaction ID : SA11AI.4217**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 125 W. 31st Street Apt. 51A

City New York State NY Zip Code 10001

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

Name of Employer Skadden Arps 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 Y Y  
 03 / 14 / 2013

**Transaction ID : SA11AI.4221**

Amount of Each Receipt this Period  
 2600.00

**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 6 OF 17 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>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 Cutiongco**

Mailing Address 243 E 18th St

City New York State NY Zip Code 10003

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

Name of Employer Kinnek Occupation Systems Engineer and Data Scientist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2013

**Transaction ID : SA11AI.4181**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 1726 Willard Street

City Washington State DC Zip Code 20009

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

Name of Employer Cover, Inc. Occupation Co-Founder

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2013

**Transaction ID : SA11AI.4150**

Amount of Each Receipt this Period  
 2600.00

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

Mailing Address 100 Christopher Columbus Drive

City Jersey City State NJ Zip Code 07302

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

Name of Employer Prestige Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2013

**Transaction ID : SA11AI.4219**

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 7 OF 17 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |              |

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

**A.** Full Name (Last, First, Middle Initial)  
**Justin Fung**

Mailing Address 301 SW Lincoln Street  
Apt. 402

City Portland State OR Zip Code 97201

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

Name of Employer McKinsey & Company Occupation Analyst

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 23 / 2013

**Transaction ID : SA11AI.4105**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 1111 Kensington Court

City Johns Creek State GA Zip Code 30022

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

Name of Employer Primerica, Inc. 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  
 03 / 11 / 2013

**Transaction ID : SA11AI.4242**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 2141 Newport Pl. NW  
#3

City Washington State DC Zip Code 20037

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

Name of Employer Hogan Lovells Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2013

**Transaction ID : SA11AI.4164**

Amount of Each Receipt this Period  
2600.00

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

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

6100.00

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

|   |  |              |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 8 OF 17 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>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)  
**Joshua Goodman**

Mailing Address PO Box 2643

City Washington State DC Zip Code 20013

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

Name of Employer Federal Trade Commission Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 11 / 2013

**Transaction ID : SA11AI.4177**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 49-701 Kamehameha Street

City Kaawa State HI Zip Code 96730

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

Name of Employer Kambhu Family LLC Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 01 / 03 / 2013

**Transaction ID : SA11AI.4103**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 131 Riverside Drive  
9A/B

City New York State NY Zip Code 10024

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

Name of Employer XELLC Occupation Researcher

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  
 03 / 11 / 2013

**Transaction ID : SA11AI.4142**

Amount of Each Receipt this Period  
250.00

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

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

3000.00



**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 17 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |              |

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

**A.** Full Name (Last, First, Middle Initial)  
**Julius Krein**

Mailing Address 160 E 91st St.  
Apt. 8l

City New York State NY Zip Code 10128

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

Name of Employer The Belisarius Group, Inc. Occupation Consultant

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  
 03 / 25 / 2013

**Transaction ID : SA11Al.4162**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 231 10th Avenue  
PH 3

City New York State NY Zip Code 10011

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

Name of Employer Malt Products Inc. Occupation Counsel

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2013

**Transaction ID : SA11Al.4148**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 4412 Kilauea Avenue

City Honolulu State HI Zip Code 96816

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

Name of Employer Hawaiian Airlines Occupation Analyst

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
276.79

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 11 / 2013

**Transaction ID : SA11Al.4226**

Amount of Each Receipt this Period  
276.79  
In-kind - Travel Cost - Airfare

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

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

3026.79

**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 17 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

**A.** Full Name (Last, First, Middle Initial)  
**Andrew Pacelli**

Mailing Address 1500 Sheridan Road  
Unit 3F

City State Zip Code  
Wilmette IL 60091

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

Name of Employer Occupation  
U.S. Department of State Diplomat

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 03 / 2013

**Transaction ID : SA11AI.4099**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 313 C St.  
Apt. B

City State Zip Code  
Washington DC 20003

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

Name of Employer Occupation  
None None

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  
 03 / 11 / 2013

**Transaction ID : SA11AI.4201**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1624 St. NW  
Apt. 303

City State Zip Code  
Washington DC 20009

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

Name of Employer Occupation  
CFPB Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2013

**Transaction ID : SA11AI.4197**

Amount of Each Receipt this Period  
250.00

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

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

3000.00

**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 17 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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

|   |                                  |  |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Bernard Toon</b>   |                                  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>03 / 25 / 2013 |
| Mailing Address 624 Paseo De La Cuma  |                                  | <b>Transaction ID : SA11AI.4158</b>                          |
| City<br>Santa Fe  | State<br>NM                      |  |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>500.00                 |
| Name of Employer<br>The FIRST Group   | Occupation<br>Partner            |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>500.00 |  |

|   |                                  |  |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Benjamin Wu</b>  |                                  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>03 / 14 / 2013 |
| Mailing Address 77 Seventh Ave.<br>Apt. 18S   |                                  | <b>Transaction ID : SA11AI.4223</b>                          |
| City<br>New York  | State<br>NY                      |  |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>250.00                 |
| Name of Employer<br>Macquarie   | Occupation<br>Finance            |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>250.00 |  |

|   |                                  |  |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Bob Wu</b>   |                                  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>03 / 11 / 2013 |
| Mailing Address 101 W. 24th Street<br>#17B  |                                  | <b>Transaction ID : SA11AI.4146</b>                          |
| City<br>New York  | State<br>NY                      |  |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>250.00                 |
| Name of Employer<br>Ziff Brothers Investments   | Occupation<br>Senior Analyst     |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>250.00 |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1000.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 12 OF 17 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>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)  
**Connie Wu**

Mailing Address 407 Park Avenue S.  
Apt. 24C

City State Zip Code  
New York NY 10016

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

Name of Employer Occupation  
Skadden Arps 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  
 03 / 11 / 2013

**Transaction ID : SA11AI.4154**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 4779 Collins Avenue  
Apt. 4102

City State Zip Code  
Miami Beach FL 33140

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

Name of Employer Occupation  
Derm101 Business

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  
 03 / 11 / 2013

**Transaction ID : SA11AI.4144**

Amount of Each Receipt this Period  
250.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

550.00

22876.79

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

|   |   |               |  |  |  |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 13 OF 17 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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

|  |                   |   |
|--|-------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ActBlue</b> |                   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 03 / 2013 |
| Mailing Address 14 Arrow Street<br>Suite 11                  |                   | Amount of Each Disbursement this Period<br>104.73             |
| City<br>Cambridge  | State<br>MA       |   |
| Purpose of Disbursement<br>Merchant Fees                     | Zip Code<br>02138 | Category/<br>Type<br>003                                      |
| Candidate Name   |                   |   |
| State:   | District:         |   |

|  |                   |   |
|--|-------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ActBlue</b> |                   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 10 / 2013 |
| Mailing Address 14 Arrow Street<br>Suite 11                  |                   | Amount of Each Disbursement this Period<br>158.03             |
| City<br>Cambridge  | State<br>MA       |   |
| Purpose of Disbursement<br>Merchant Fees                     | Zip Code<br>02138 | Category/<br>Type<br>003                                      |
| Candidate Name   |                   |   |
| State:   | District:         |   |

|  |                   |   |
|--|-------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>c. ActBlue</b> |                   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 17 / 2013 |
| Mailing Address 14 Arrow Street<br>Suite 11                  |                   | Amount of Each Disbursement this Period<br>0.99               |
| City<br>Cambridge  | State<br>MA       |   |
| Purpose of Disbursement<br>Merchant Fees                     | Zip Code<br>02138 | Category/<br>Type<br>003                                      |
| Candidate Name   |                   |   |
| State:   | District:         |   |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 263.75 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 14 OF 17                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Stanley Chang</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>01 / 30 / 2013                          |
| Mailing Address 637 Ulumaika Street   |  | Amount of Each Disbursement this Period<br>226.90<br><b>Transaction ID : SB17.4257</b> |
| City Honolulu State HI Zip Code 96816   | Purpose of Disbursement Reimbursement - Travel Cost - Expedia Airfare<br>Candidate Name<br>Category/Type 002                                       |  |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: HI District: 01 | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Expedia</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>01 / 15 / 2013  |
| Mailing Address 333 108th Avenue NE  |  | Amount of Each Disbursement this Period<br>226.90<br><b>Transaction ID : SB17.4257.0</b><br><b>[MEMO ITEM]</b> |
| City Bellevue State WA Zip Code 98004  | Purpose of Disbursement Vendor - Travel Cost - Airfare<br>Candidate Name<br>Category/Type 002  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Stanley Chang</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>01 / 30 / 2013                          |
| Mailing Address 637 Ulumaika Street   |  | Amount of Each Disbursement this Period<br>248.22<br><b>Transaction ID : SB17.4261</b> |
| City Honolulu State HI Zip Code 96816   | Purpose of Disbursement Reimbursement - Travel Cost - Hawaiian Airlines Airfare<br>Candidate Name<br>Category/Type 002                             |  |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: HI District: 01 | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 475.12 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 15 OF 17                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Hawaiian Airlines</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>01 / 11 / 2013 |
| Mailing Address 3375 Koapaka Street<br>G-350  |  | Amount of Each Disbursement this Period<br>248.22             |
| City Honolulu   | State HI Zip Code 96819  |   |
| Purpose of Disbursement<br>Vendor - Travel Cost - Airfare   | Category/Type<br>002   | Transaction ID : SB17.4261.0<br><br>[MEMO ITEM]               |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Stanley Chang</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>02 / 25 / 2013 |
| Mailing Address 637 Ulumaika Street  |  | Amount of Each Disbursement this Period<br>350.95             |
| City Honolulu  | State HI Zip Code 96816  |   |
| Purpose of Disbursement<br>Reimbursement - Travel Cost - FareGeek Airfare  | Category/Type<br>002   | Transaction ID : SB17.4265                                    |
| Candidate Name   |  |   |
| Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: HI District: 01   |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. FareGeek</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>01 / 30 / 2013 |
| Mailing Address 2140 S Dupont Highway   |  | Amount of Each Disbursement this Period<br>350.95             |
| City Camden,  | State DE Zip Code 19934  |   |
| Purpose of Disbursement<br>Vendor -Travel Cost - Airfare  | Category/Type<br>002   | Transaction ID : SB17.4265.0<br><br>[MEMO ITEM]               |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 350.95 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 16 OF 17                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Alexander Koo</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>03 / 18 / 2013</b>                          |
| Mailing Address <b>23-52 Bell Blvd.</b>   |   | Amount of Each Disbursement this Period<br><b>458.80</b><br><b>Transaction ID : SB17.4244</b> |
| City <b>New York</b> State <b>NY</b> Zip Code <b>11360</b>  | Category/Type<br><b>007</b>   |   |
| Purpose of Disbursement<br><b>Reimbursement - Stella Beverages</b>  | Candidate Name  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <b>2014</b><br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |   |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Stella Wines &amp; Spirits</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>03 / 07 / 2013</b>  |
| Mailing Address <b>1289 Clint Moore Road</b>  |   | Amount of Each Disbursement this Period<br><b>458.80</b><br><b>Transaction ID : SB17.4244.0</b><br><b>[MEMO ITEM]</b> |
| City <b>Boca Raton</b> State <b>FL</b> Zip Code <b>33487</b>  | Category/Type<br><b>007</b>   |   |
| Purpose of Disbursement<br><b>Vendor - Beverages</b>  | Candidate Name  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <b>2014</b><br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |   |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Derek Miw</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>01 / 11 / 2013</b>                          |
| Mailing Address <b>4412 Kilauea Avenue</b>  |   | Amount of Each Disbursement this Period<br><b>276.79</b><br><b>Transaction ID : SB17.4228</b> |
| City <b>Honolulu</b> State <b>HI</b> Zip Code <b>96816</b>  | Category/Type<br><b>002</b>   |   |
| Purpose of Disbursement<br><b>In-kind - Travel Cost - Airfare</b>   | Candidate Name  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: <b>2014</b><br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |   |   |

|   |               |
|---|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>735.59</b> |
| <b>TOTAL</b> This Period (last page this line number only)..... |               |



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

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

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

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Rebecca Soon</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>03 / 18 / 2013 |
| Mailing Address 39 Makaweli Street  |  | Amount of Each Disbursement this Period<br>386.99        |
| City Honolulu   | State HI Zip Code 96825  |  |
| Purpose of Disbursement<br>Reimbursement - Whole Foods Catering Services  |  | <b>Transaction ID : SB17.4254</b>                        |
| Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Category/Type<br>007                                     |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Whole Foods</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>03 / 05 / 2013 |
| Mailing Address 250 7th Ave   |  | Amount of Each Disbursement this Period<br>386.99        |
| City New York   | State NY Zip Code 10001  |  |
| Purpose of Disbursement<br>Vendor - Catering Services   |  | <b>Transaction ID : SB17.4254.0</b>                      |
| Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Category/Type<br>007                                     |
| State: District:  |  |  |

**[MEMO ITEM]**

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

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 386.99  |
| <b>TOTAL</b> This Period (last page this line number only)..... | 2212.40 |