

# 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

Hanabusa for Hawaii

ADDRESS (number and street)

PO BOX 1416

Check if different than previously reported. (ACC)

Honolulu

HI

96806

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00468413

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

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

M M / D D / Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

01 / 01 / 2017

through

M M / D D / Y Y Y Y

03 / 31 / 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Yamamoto, George, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Yamamoto, George, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y

04 / 14 / 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office Use Only

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**Hanabusa for Hawaii**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	41945.85	47247.85
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	41945.85	47247.85
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	59854.43	96584.38
(b) Total Offsets to Operating Expenditures (from Line 14).....	500.00	500.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	59354.43	96084.38
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	256656.33	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	13975.36	

**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 05/2016)

Write or Type Committee Name

Hanabusa for Hawaii

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2000.00	3000.00
(ii) Unitemized.....	4745.85	5547.85
(iii) TOTAL of contributions from individuals ▶	6745.85	8547.85
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	35200.00	38700.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	41945.85	47247.85
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	500.00	500.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	42445.85	47747.85

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	59854.43	96584.38
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	200000.00	200000.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	200000.00	200000.00
20. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	43750.00	43750.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	303604.43	340334.38

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	517814.91
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	42445.85
25. SUBTOTAL (add Line 23 and Line 24).....	560260.76
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	303604.43
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	256656.33

**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 31  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  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)  
**Hanabusa for Hawaii**

**A.** Full Name (Last, First, Middle Initial)  
**The Chickasaw Nation**

Mailing Address PO Box 1548

City: Ada State: OK Zip Code: 74821-1548

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 24 / 2017

Transaction ID : VN8PTE4TJS1

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address 2346 S Queen St

City: Arlington State: VA Zip Code: 22202-1549

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:  
Twenty-First Century Group, Inc. Principal

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 14 / 2017

Transaction ID : VN8PTE4R312

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 5265 Lawelawe Pl

City: Honolulu State: HI Zip Code: 96821-1748

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:  
NERA Consultant

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 24 / 2017

Transaction ID : VN8PTE55RK2

Amount of Each Receipt this Period  
250.00

Memo Item

\* Earmarked Contribution: See Below

**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: PAGE 6 OF 31  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Hanabusa for Hawaii**

**A.** Full Name (Last, First, Middle Initial)  
**Actblue - Conduit FED**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2006.51

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2017

**Transaction ID : VN8PTE55RK2E**

Amount of Each Receipt this Period  
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
**Pavey, Judith, A., ,**

Mailing Address 3003 Kalakaua Ave  
Apt 11A

City Honolulu State HI Zip Code 96815-4702

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

Name of Employer Occupation  
Self-Employed Accountant

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 24 / 2017

**Transaction ID : VN8PTE4TJR3**

Amount of Each Receipt this Period  
500.00

Memo Item

**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

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 31	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Hanabusa for Hawaii**

**A.** Full Name (Last, First, Middle Initial)  
**National Assn Of Realtors PAC**

Mailing Address 430 N Michigan Ave  
Ste 500

City Chicago State IL Zip Code 60611-4087

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 14 / 2017

**Transaction ID : VN8PTE4R320**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**KIRBY CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 55 Waugh Dr  
Ste 1000

City Houston State TX Zip Code 77007-5834

FEC ID number of contributing federal political committee. **C** C00250027

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 11 / 2017

**Transaction ID : VN8PTE3PZTO**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**International Longshore & Warehouse Union PAF**

Mailing Address 1188 Franklin St  
Ste 400

City San Francisco State CA Zip Code 94109-6898

FEC ID number of contributing federal political committee. **C** C00176214

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 03 / 2017

**Transaction ID : VN8PTE55051**

Amount of Each Receipt this Period  
2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4500.00
<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 8 OF 31	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Hanabusa for Hawaii**

**A.** Full Name (Last, First, Middle Initial)  
**Matson, Inc. Federal Election Committee**

Mailing Address 333 Market St

City San Francisco	State CA	Zip Code 94105-2101
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FEC ID number of contributing federal political committee. **C** C00024752

Name of Employer	Occupation
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Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 20 / 2017

**Transaction ID : VN8PTE3R632**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**JONES WALKER L.L.P.**

Mailing Address 201 Saint Charles Ave  
FI 49

City New Orleans	State LA	Zip Code 70170-1000
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FEC ID number of contributing federal political committee. **C** C00111534

Name of Employer	Occupation
------------------	------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 20 / 2017

**Transaction ID : VN8PTE3R682**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**JOBS, OPPORTUNITIES AND EDUCATION PAC (JOE-PAC)**

Mailing Address 8456 Grand Ave

City Elmhurst	State NY	Zip Code 11373-4352
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00362384

Name of Employer	Occupation
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Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2017

**Transaction ID : VN8PTE6S7X2**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	_____ 6000.00
<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 9 OF 31	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Hanabusa for Hawaii**

**A.** Full Name (Last, First, Middle Initial)  
**National Active & Retired Federal Employee Assn**

Mailing Address 606 N Washington St

City Alexandria	State VA	Zip Code 22314-1914
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FEC ID number of contributing federal political committee. **C** C00091561

Name of Employer	Occupation
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Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 03 / 2017

**Transaction ID : VN8PTE55093**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**SHIPBUILDERS COUNCIL OF AMERICA**

Mailing Address 655 15Th St NW  
Ste 225

City Washington	State DC	Zip Code 20005-5704
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FEC ID number of contributing federal political committee. **C** C00374355

Name of Employer	Occupation
------------------	------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 17 / 2017

**Transaction ID : VN8PTE4TGV3**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**FILEMON VELA FOR CONGRESS**

Mailing Address 10715 Gulfdale St  
Ste 235

City San Antonio	State TX	Zip Code 78216-3666
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00513531

Name of Employer	Occupation
------------------	------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 11 / 2017

**Transaction ID : VN8PTE3PZX3**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	3000.00
<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 10 OF 31	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Hanabusa for Hawaii**

**A.** Full Name (Last, First, Middle Initial)  
**Crowley Maritime Corporation Federal PAC**

Mailing Address 9457 Regency Square Blvd

City Jacksonville	State FL	Zip Code 32225-8126
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FEC ID number of contributing federal political committee. **C** C00147231

Name of Employer	Occupation
------------------	------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
02	/	14	/	2017

**Transaction ID : VN8PTE4R304**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN MARITIME OFFICERS VOLUNTARY POLITICAL ACTION FUND**

Mailing Address PO Box 66  
DANIA BEACH

City Dania	State FL	Zip Code 33004-0066
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00027532

Name of Employer	Occupation
------------------	------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01	/	11	/	2017

**Transaction ID : VN8PTE3PZR4**

Amount of Each Receipt this Period  
2500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Marine Engineers' Beneficial Assn PAF**

Mailing Address 444 N Capitol St NW  
Ste 800

City Washington	State DC	Zip Code 20001-1508
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FEC ID number of contributing federal political committee. **C** C00279380

Name of Employer	Occupation
------------------	------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03	/	31	/	2017

**Transaction ID : VN8PTE6S8F5**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	4500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 OF 31  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Hanabusa for Hawaii**

**A.** Full Name (Last, First, Middle Initial)  
**HARRIS CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 600 Maryland Ave SW  
Ste 850E

City Washington State DC Zip Code 20024-2566

FEC ID number of contributing federal political committee. **C** C00100321

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 18 / 2017

**Transaction ID : VN8PTE6S7W5**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**United Transportation Union PAC**

Mailing Address 14600 Detroit Ave  
Ste 200

City Lakewood State OH Zip Code 44107-4223

FEC ID number of contributing federal political committee. **C** C00001636

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 06 / 2017

**Transaction ID : VN8PTE550C6**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Seafarers Political Activity Donation**

Mailing Address 5201 Auth Way  
Camp Springs

City Suitland State MD Zip Code 20746-4211

FEC ID number of contributing federal political committee. **C** C00004325

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 10 / 2017

**Transaction ID : VN8PTE55RH6**

Amount of Each Receipt this Period  
1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 31	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Hanabusa for Hawaii**

**A.** Full Name (Last, First, Middle Initial)  
**Huntington Ingalls Industries Inc. PAC (SHIPPAC)**

Mailing Address 300 M St SE  
Ste 350

City Washington State DC Zip Code 20003-3436

FEC ID number of contributing federal political committee. **C** C00325092

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 28 / 2017

Transaction ID : VN8PTE6S8E7

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Richard E Neal For Congress Committee**

Mailing Address 76 Magnolia Ter

City Springfield State MA Zip Code 01108-2533

FEC ID number of contributing federal political committee. **C** C00226522

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 17 / 2017

Transaction ID : VN8PTE3QDQ7

Amount of Each Receipt this Period  
2000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**K&L GATES LLP POLITICAL ACTION COMMITTEE (DC)**

Mailing Address 1601 K St NW

City Washington State DC Zip Code 20006-1682

FEC ID number of contributing federal political committee. **C** C00213173

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 11 / 2017

Transaction ID : VN8PTE3PZV7

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 OF 31  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Hanabusa for Hawaii**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN WATERWAYS OPERATORS-PAC**

Mailing Address 801 N Quincy St  
Ste 200

City: Arlington State: VA Zip Code: 22203-1708

FEC ID number of contributing federal political committee: **C** C00034678

Name of Employer: Occupation:

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 22 / 2017

Transaction ID : VN8PTE6S7V7

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T**

Mailing Address 208 S Akard St  
Ste 2701

City: Dallas State: TX Zip Code: 75202-4206

FEC ID number of contributing federal political committee: **C** C00109017

Name of Employer: Occupation:

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 24 / 2017

Transaction ID : VN8PTE4TJV7

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Hawaiian Airlines Inc PAC**

Mailing Address PO Box 30008

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

FEC ID number of contributing federal political committee: **C** C00456939

Name of Employer: Occupation:

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 14 / 2017

Transaction ID : VN8PTE4R338

Amount of Each Receipt this Period  
2700.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 4700.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 31	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Hanabusa for Hawaii**

**A.** Full Name (Last, First, Middle Initial)  
**Boeing Company Political Action Committee**

Mailing Address 1200 Wilson Blvd

City Arlington	State VA	Zip Code 22209-2300
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer	Occupation
------------------	------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
03 / 10 / 2017

**Transaction ID : VN8PTE55RG8**

Amount of Each Receipt this Period  

1000.00
---------

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**NEW DEMOCRAT COALITION POLITICAL ACTION COMMITTEE**

Mailing Address 700 13Th St NW  
Ste 600

City Washington	State DC	Zip Code 20005-5998
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00409730

Name of Employer	Occupation
------------------	------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
03 / 28 / 2017

**Transaction ID : VN8PTE6S8D9**

Amount of Each Receipt this Period  

2500.00
---------

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**International Organization Of Masters Mates & Pilots PCF**

Mailing Address 1025 Connecticut Ave NW  
Ste 507

City Washington	State DC	Zip Code 20036-5412
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00073056

Name of Employer	Occupation
------------------	------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
02 / 03 / 2017

**Transaction ID : VN8PTE49QQ9**

Amount of Each Receipt this Period  

1000.00
---------

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4500.00
<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 15 OF 31	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Hanabusa for Hawaii**

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN ROLL-ON ROLL-OFF CARRIER GROUP, INC. FREEDOM PAC/ARC FREEDOM PAC

Mailing Address 188 Broadway

City Woodcliff Lake	State NJ	Zip Code 07677-8072
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00432963

Name of Employer	Occupation
------------------	------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 13 / 2017

**Transaction ID : VN8PTE3PZZ9**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

**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  
 \_\_\_\_\_

Memo Item

**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  
 \_\_\_\_\_

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	_____ 1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	_____ 35200.00

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

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

FOR LINE NUMBER: PAGE 16 OF 31  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Hanabusa for Hawaii**

**A.** Full Name (Last, First, Middle Initial)  
**Interisland Terminal**

Mailing Address 2065 S King St  
Ste 302

City Honolulu State HI Zip Code 96826-2242

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 06 / 2017

**Transaction ID : VN8PTE6TGM9**

Amount of Each Receipt this Period  
500.00

Memo Item

Return Security Deposit

**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

Memo Item

**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

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	500.00



**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 17 OF 31	
	<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)  
**Hanabusa for Hawaii**

Full Name (Last, First, Middle Initial) <b>A. Suntrust</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2017
Mailing Address PO Box 6600		FEC Identification Number C
City Hagerstown	State MD	Zip Code 21741-6600
Purpose of Disbursement Merchant Fees		Amount of Each Disbursement this Period 108.55
Candidate Name		Transaction ID : VN7QJ9WQ510
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Darrell Lim And Company, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2017
Mailing Address 81 S Hotel St Ste 300		FEC Identification Number C
City Honolulu	State HI	Zip Code 96813-3145
Purpose of Disbursement Accounting services		Amount of Each Disbursement this Period 3560.21
Candidate Name		Transaction ID : VN7QJ9WJA60
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Fiorello Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2017
Mailing Address 3914 Barcroft Mews Ct		FEC Identification Number C
City Falls Church	State VA	Zip Code 22041-1218
Purpose of Disbursement Reimb - Catering for Event		Amount of Each Disbursement this Period 908.32
Candidate Name		Transaction ID : VN7QJ9WQ5F0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4577.08
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 31	
	<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)  
**Hanabusa for Hawaii**

Full Name (Last, First, Middle Initial) <b>A. Bistro Bis</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2017
Mailing Address 15 E St NW		FEC Identification Number C
City Washington	State DC	Zip Code 20001-1706
Purpose of Disbursement Fundraiser - Catering		Amount of Each Disbursement this Period 908.32
Candidate Name		Transaction ID : VN7QJ9WQ5G8
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Bankcard Center</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2017
Mailing Address PO Box 29450		FEC Identification Number C
City Honolulu	State HI	Zip Code 96820-1850
Purpose of Disbursement Credit Card Payment		Amount of Each Disbursement this Period 430.93
Candidate Name		Transaction ID : VN7QJ9WQ5M0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Hawaiian Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2016
Mailing Address PO Box 30008		FEC Identification Number C
City Honolulu	State HI	Zip Code 96820-0008
Purpose of Disbursement Travel Cost - Airfare to Maui		Amount of Each Disbursement this Period 364.80
Candidate Name		Transaction ID : VN7QJ9WQ5N8
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	430.93
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 31	
	<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)  
**Hanabusa for Hawaii**

Full Name (Last, First, Middle Initial) <b>A. Fiorello Consulting</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2017	
Mailing Address 3914 Barcroft Mews Ct			FEC Identification Number C	
City Falls Church	State VA	Zip Code 22041-1218	Amount of Each Disbursement this Period 3000.00	
Purpose of Disbursement Consulting - Fundraising		Category/ Type	Transaction ID : VN7QJ9WQ5A1	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Anthology Marketing Group</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2017	
Mailing Address 1003 Bishop St Fl 9			FEC Identification Number C	
City Honolulu	State HI	Zip Code 96813-6400	Amount of Each Disbursement this Period 8806.63	
Purpose of Disbursement Media Buys		Category/ Type	Transaction ID : VN7QJ9WQ4R1	
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>C. Suntrust</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2017	
Mailing Address PO Box 6600			FEC Identification Number C	
City Hagerstown	State MD	Zip Code 21741-6600	Amount of Each Disbursement this Period 113.10	
Purpose of Disbursement Merchant Fees		Category/ Type	Transaction ID : VN7QJ9WQ502	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	11919.73
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 31	
	<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)  
**Hanabusa for Hawaii**

Full Name (Last, First, Middle Initial) <b>A. Darrell Lim And Company, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2017
Mailing Address 81 S Hotel St Ste 300		FEC Identification Number C
City Honolulu	State HI	Zip Code 96813-3145
Purpose of Disbursement Accounting services		Amount of Each Disbursement this Period 11345.55
Candidate Name		Transaction ID : VN7QJ9WJA52
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Hanabusa, Colleen, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2017
Mailing Address 3660 Waokanaka St		FEC Identification Number C H0HI01165
City Honolulu	State HI	Zip Code 96817-5224
Purpose of Disbursement Reimb - Travel Expense for Meetings		Amount of Each Disbursement this Period 2136.96
Candidate Name <b>Hanabusa, Colleen, , ,</b>		Transaction ID : VN7QJ9WQ5R2
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: HI District: 01		

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Hotel</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2016
Mailing Address 200 C St SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003-1909
Purpose of Disbursement Travel Cost - Hotel		Amount of Each Disbursement this Period 372.35
Candidate Name		Transaction ID : VN7QJ9WQ5T7
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	13482.51
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 31			
	<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)  
**Hanabusa for Hawaii**

Full Name (Last, First, Middle Initial) <b>A. United Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2017		
Mailing Address 77 W Wacker Dr Ste MEZZ			FEC Identification Number C		
City Chicago	State IL	Zip Code 60601-1732	Amount of Each Disbursement this Period 1631.84		
Purpose of Disbursement Travel Cost - Airfare to Meetings		Category/ Type	Transaction ID : VN7QJ9WQ5S9		
Candidate Name		<input checked="" type="checkbox"/> Memo Item *			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Fiorello Consulting</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2017		
Mailing Address 3914 Barcroft Mews Ct			FEC Identification Number C		
City Falls Church	State VA	Zip Code 22041-1218	Amount of Each Disbursement this Period 3000.00		
Purpose of Disbursement Consulting - Fundraising		Category/ Type	Transaction ID : VN7QJ9WQ593		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Anthology Marketing Group</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2017		
Mailing Address 1003 Bishop St Fl 9			FEC Identification Number C		
City Honolulu	State HI	Zip Code 96813-6400	Amount of Each Disbursement this Period 10000.00		
Purpose of Disbursement Media Buys		Category/ Type	Transaction ID : VN7QJ9WQ4Q3		
Candidate Name		<input type="checkbox"/> Memo Item			
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	13000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 31			
	<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)  
**Hanabusa for Hawaii**

Full Name (Last, First, Middle Initial) <b>A. Bankcard Center</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2017
Mailing Address PO Box 29450		FEC Identification Number C
City Honolulu	State HI	Zip Code 96820-1850
Purpose of Disbursement Credit Card Payment		Amount of Each Disbursement this Period 1320.60
Candidate Name		Transaction ID : VN7QJ9WQ5W3
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Hyatt Regency Baltimore</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 08 / 2017
Mailing Address 300 Light St		FEC Identification Number C
City Baltimore	State MD	Zip Code 21202-1012
Purpose of Disbursement Travel Cost - Hotel		Amount of Each Disbursement this Period 1250.00
Candidate Name		Transaction ID : VN7QJ9WQ5Z7
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Fiorello Consulting</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2017
Mailing Address 3914 Barcroft Mews Ct		FEC Identification Number C
City Falls Church	State VA	Zip Code 22041-1218
Purpose of Disbursement Consulting - Fundraising		Amount of Each Disbursement this Period 3000.00
Candidate Name		Transaction ID : VN7QJ9WQ585
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4320.60
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 31	
	<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)  
**Hanabusa for Hawaii**

<b>A. Fiorello Consulting</b> Full Name (Last, First, Middle Initial) Mailing Address 3914 Barcroft Mews Ct City Falls Church State VA Zip Code 22041-1218 Purpose of Disbursement Reimb - Catering for Event Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:			Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2017 FEC Identification Number C Amount of Each Disbursement this Period 947.59 Transaction ID : VN7QJ9WQ5D5 <input type="checkbox"/> Memo Item
---	--	--	--

<b>B. The George</b> Full Name (Last, First, Middle Initial) Mailing Address 15 E St NW City Washington State DC Zip Code 20001-1501 Purpose of Disbursement Fundraiser - Catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:			Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2017 FEC Identification Number C Amount of Each Disbursement this Period 947.59 Transaction ID : VN7QJ9WQ5E3 <input checked="" type="checkbox"/> Memo Item *
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<b>C. Crossroads Consulting, Inc.</b> Full Name (Last, First, Middle Initial) Mailing Address 707 H St NW Ste 300 City Washington State DC Zip Code 20001-3792 Purpose of Disbursement Field Data, Web and Email Maintenance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:			Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2017 FEC Identification Number C Amount of Each Disbursement this Period 2301.93 Transaction ID : VN7QJ9WQ4P5 <input type="checkbox"/> Memo Item
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<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3249.52
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 31	
	<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)  
**Hanabusa for Hawaii**

Full Name (Last, First, Middle Initial) <b>A. Accurate Word LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2017	
Mailing Address 4481 White Plains Ln			FEC Identification Number C	
City White Plains	State MD	Zip Code 20695-3018	Amount of Each Disbursement this Period 820.40	
Purpose of Disbursement Printing - Stationery and Envelopes		Category/ Type	Transaction ID : VN7QJ9WQ5H6	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. NGP VAN, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2017	
Mailing Address 1101 15Th St NW Ste 500			FEC Identification Number C	
City Washington	State DC	Zip Code 20005-5006	Amount of Each Disbursement this Period 2550.00	
Purpose of Disbursement Software and Support		Category/ Type	Transaction ID : VN7QJ9WQ577	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Crossroads Consulting, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2017	
Mailing Address 707 H St NW Ste 300			FEC Identification Number C	
City Washington	State DC	Zip Code 20001-3792	Amount of Each Disbursement this Period 2551.93	
Purpose of Disbursement Field Data, Web and Email Maintenance		Category/ Type	Transaction ID : VN7QJ9WQ4N7	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5922.33
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 31	
	<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)  
**Hanabusa for Hawaii**

Full Name (Last, First, Middle Initial) <b>A. Darrell Lim And Company, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2017	
Mailing Address 81 S Hotel St Ste 300			FEC Identification Number C	
City Honolulu	State HI	Zip Code 96813-3145	Amount of Each Disbursement this Period 1340.31	
Purpose of Disbursement Accounting services		Category/ Type	Transaction ID : VN7QJ9WQ4T7	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Suntrust</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2017	
Mailing Address PO Box 6600			FEC Identification Number C	
City Hagerstown	State MD	Zip Code 21741-6600	Amount of Each Disbursement this Period 108.55	
Purpose of Disbursement Merchant Fees		Category/ Type	Transaction ID : VN7QJ9WQ528	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Darrell Lim And Company, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2017	
Mailing Address 81 S Hotel St Ste 300			FEC Identification Number C	
City Honolulu	State HI	Zip Code 96813-3145	Amount of Each Disbursement this Period 1340.31	
Purpose of Disbursement Accounting services		Category/ Type	Transaction ID : VN7QJ9WQ4S9	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2789.17
<b>TOTAL</b> This Period (last page this line number only).....▶	59691.87

**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 31	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Hanabusa for Hawaii**

Full Name (Last, First, Middle Initial) <b>A. Hanabusa, Colleen, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2017
Mailing Address 3660 Waokanaka St		FEC Identification Number <b>C</b> H0HI01165
City Honolulu	State HI	Zip Code 96817-5224
Purpose of Disbursement Repayment Loan		Amount of Each Disbursement this Period 83000.00
Candidate Name <b>Hanabusa, Colleen, , ,</b>		Transaction ID : VN7QJ9WQ5K2
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2018	<input type="checkbox"/> Memo Item
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼	
State: HI	District: 01	

Full Name (Last, First, Middle Initial) <b>B. Hanabusa, Colleen, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2017
Mailing Address 3660 Waokanaka St		FEC Identification Number <b>C</b> H0HI01165
City Honolulu	State HI	Zip Code 96817-5224
Purpose of Disbursement Repayment Loan		Amount of Each Disbursement this Period 117000.00
Candidate Name <b>Hanabusa, Colleen, , ,</b>		Transaction ID : VN7QJ9WQ5J4
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2018	<input type="checkbox"/> Memo Item
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼	
State: HI	District: 01	

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	200000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	200000.00

# 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 27 OF 31	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**Hanabusa for Hawaii**

Full Name (Last, First, Middle Initial) <b>A. Democratic Congressional Campaign Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2017
Mailing Address 430 S Capitol St SE		FEC Identification Number C C0000935
City Washington	State DC	Zip Code 20003-4024
Purpose of Disbursement 2018 Contribution		Amount of Each Disbursement this Period 43750.00
Candidate Name <b>Democratic Congressional Campaign Committee</b>		Transaction ID : VN7QJ9WQ4M9
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	43750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	43750.00

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Hanabusa for Hawaii** Transaction ID : **VN8PTCW6HZ1L**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Hanabusa, Colleen, , ,		<input type="checkbox"/> Memo Item	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3660 Waakanaka St			
City Honolulu	State HI	ZIP Code 96817-5224	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 83000.00	Cumulative Payment To Date 83000.00	Balance Outstanding at Close of This Period 0.00
-------------------------------------	--	---

<b>TERMS</b>	Date Incurred M 08 / D 07 / Y 2014 Y	Date Due M M / D D / Y none Y	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	0.00
<b>TOTALS</b> This Period (last page in this line only).....▶	

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) Transaction ID : VN8PTCS3HK6L  
 Hanabusa for Hawaii

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Hanabusa, Colleen, , ,		<input type="checkbox"/> Memo Item	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3660 Waakanaka St			
City Honolulu	State HI	ZIP Code 96817-5224	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 117000.00	Cumulative Payment To Date 117000.00	Balance Outstanding at Close of This Period 0.00
--------------------------------------	---	---

<b>TERMS</b>	Date Incurred M 06 / D 30 / Y 2014	Date Due M M / D D / Due on Demand	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....▶	[ ] 0.00
<b>TOTALS</b> This Period (last page in this line only).....▶	[ ] 0.00

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

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 30 OF 31
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Hanabusa for Hawaii**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Crossroads Consulting, Inc.</b>			Nature of Debt (Purpose): Email program and website maintenance
Mailing Address 707 H St NW Ste 300			
City Washington	State DC	Zip Code 20001-3792	

Outstanding Balance Beginning This Period 0.00	Transaction ID : VN5S29HA2X0	
Amount Incurred This Period 8216.20	Payment This Period 0.00	Outstanding Balance at Close of This Period 8216.20

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Ross, Brittany, E, ,</b>			Nature of Debt (Purpose): Fundraising Services
Mailing Address 1302 Porter Ave			
City Honolulu	State HI	Zip Code 96818-4732	

Outstanding Balance Beginning This Period 0.00	Transaction ID : VN5S29HA2W2	
Amount Incurred This Period 5759.16	Payment This Period 0.00	Outstanding Balance at Close of This Period 5759.16

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Anthology Marketing Group</b>			Nature of Debt (Purpose): Production Cost
Mailing Address 1003 Bishop St Fl 9			
City Honolulu	State HI	Zip Code 96813-6400	

Outstanding Balance Beginning This Period 10000.00	Transaction ID : VN5S29HA1Z3	
Amount Incurred This Period 0.00	Payment This Period 10000.00	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	13975.36
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	▶	

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Hanabusa for Hawaii**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Darrell Lim And Company, Inc.**

Nature of Debt (Purpose):  
Accounting Services

Mailing Address 81 S Hotel St  
Ste 300

City Honolulu State HI Zip Code 96813-3145

Outstanding Balance Beginning This Period

3560.21

Transaction ID : VN5S29HA2C5

Amount Incurred This Period

0.00

Payment This Period

3560.21

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Darrell Lim And Company, Inc.**

Nature of Debt (Purpose):  
Accounting Services - October

Mailing Address 81 S Hotel St  
Ste 300

City Honolulu State HI Zip Code 96813-3145

Outstanding Balance Beginning This Period

11345.55

Transaction ID : VN5S29HA2B7

Amount Incurred This Period

0.00

Payment This Period

11345.55

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) .....

0.00

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

13975.36

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) .....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) .....

13975.36