

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 HAWAIIAN AIRLINES INC POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 3375 KOAPAKA STREET SUITE G350 HONOLULU HI 96819

2. FEC IDENTIFICATION NUMBER C C00456939 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X]

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report (selected), Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 01 / 01 / 2021 through 06 / 30 / 2021

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 Cummisky, Margaret, , ,

Signature of Treasurer Cummisky, Margaret, , , [Electronically Filed] Date 07 / 26 / 2021

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

HAWAIIAN AIRLINES INC POLITICAL ACTION COMMITTEE

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2021"/>	<input type="text" value="3964.26"/>	<input type="text" value="3964.26"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="3964.26"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="42721.00"/>	<input type="text" value="42721.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="46685.26"/>	<input type="text" value="46685.26"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="19500.00"/>	<input type="text" value="19500.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="27185.26"/>	<input type="text" value="27185.26"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

HAWAIIAN AIRLINES INC POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 01 / 01 / 2021 To: 06 / 30 / 2021

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	42721.00	42721.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	42721.00	42721.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	42721.00	42721.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	42721.00	42721.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	42721.00	42721.00

DETAILED SUMMARY PAGE

of Disbursements

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II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	17500.00	17500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	2000.00	2000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	2000.00	2000.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	19500.00	19500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	19500.00	19500.00

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	42721.00	42721.00
34. Total Contribution Refunds (from Line 28(d))	2000.00	2000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	40721.00	40721.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 12
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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)
HAWAIIAN AIRLINES INC POLITICAL ACTION COMMITTEE

A. Alter, Aaron, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3375 Koapaka St
 Suite G350
 City Honolulu State HI Zip Code 96819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hawaiian Airlines, Inc. Occupation (for Individual) EVP, Chief Legal Officer and Secretary
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 22 / 2021
Transaction ID : SA11AI.5002
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. Fry, Earl, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3375 Koapaka St,
 City Honolulu State HI Zip Code 96819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hawaiian Holdings, Inc. Occupation (for Individual) Director, Chair of the Audit & Finance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 22 / 2021
Transaction ID : SA11AI.5015
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. Hirashima, K., Sayle, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3375 Koapaka St
 City Honolulu State HI Zip Code 96819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hawaiian Airlines, Inc. Occupation (for Individual) VP, Controller
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 05 / 10 / 2021
Transaction ID : SA11AI.5016
 Amount of Each Receipt this Period 1200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	11200.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 12
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HAWAIIAN AIRLINES INC POLITICAL ACTION COMMITTEE

A. Ingram, Peter, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3375 Koapaka Street
Suite G350

City Honolulu State HI Zip Code 96819

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

Name of Employer (for Individual) Hawaiian Airlines, Inc. Occupation (for Individual) President and CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 24 / 2021
Transaction ID : SA11AI.5006

Amount of Each Receipt this Period 5000.00

Memo Item

B. Landers, James, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3375 Koapaka St
Suite G350

City Honolulu State HI Zip Code 96819

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

Name of Employer (for Individual) Hawaiian Airlines, Inc. Occupation (for Individual) SVP Technical Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 24 / 2021
Transaction ID : SA11AI.5007

Amount of Each Receipt this Period 2500.00

Memo Item

C. Mannis, Avi, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3375 Koapaka St
Suite G350

City Honolulu State HI Zip Code 96819

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

Name of Employer (for Individual) Hawaiian Airlines, Inc. Occupation (for Individual) SVP, Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 03 / 30 / 2021
Transaction ID : SA11AI.5010

Amount of Each Receipt this Period 3000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	10500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 12
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HAWAIIAN AIRLINES INC POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Okinaka, Shannon, L., ,			Date of Receipt MM / DD / YYYY 03 / 22 / 2021		
Mailing Address 3375 Koapaka St Suite G350			Transaction ID : SA11AI.5003		
City Honolulu	State HI	Zip Code 96819	Amount of Each Receipt this Period 7000.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) Hawaiian Airlines, Inc.		Occupation (for Individual) EVP, Chief Financial Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 7000.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Overbeek, Brent, A., ,			Date of Receipt MM / DD / YYYY 03 / 22 / 2021		
Mailing Address 3375 Koapaka St Suite G350			Transaction ID : SA11AI.5004		
City Honolulu	State HI	Zip Code 96819	Amount of Each Receipt this Period 2021.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) Hawaiian Airlines, Inc.		Occupation (for Individual) VP, Network Planning & Revenue Mgr			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2021.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Snook, Jonathan, D., ,			Date of Receipt MM / DD / YYYY 03 / 22 / 2021		
Mailing Address 3375 Koapaka St Suite G350			Transaction ID : SA11AI.5005		
City Honolulu	State HI	Zip Code 96819	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) Hawaiian Airlines, Inc.		Occupation (for Individual) EVP, Chief Operating Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 5000.00			

SUBTOTAL of Receipts This Page (optional).....	14021.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 9 OF 12
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HAWAIIAN AIRLINES INC POLITICAL ACTION COMMITTEE

A. Sorensen, Robert, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3375 Koapaka St,

City Honolulu	State HI	Zip Code 96819
------------------	-------------	-------------------

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

Name of Employer (for Individual) Hawaiian Holdings, Inc.	Occupation (for Individual) VP, Marketing and eCommerce
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	07	/	2021

Transaction ID : SA11AI.5012

Amount of Each Receipt this Period
2000.00

Memo Item

B. Zwern, Richard, N., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3375 Koapaka St

City Honolulu,	State HI	Zip Code 96819
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Hawaiian Holdings, Inc.	Occupation (for Individual) Director, Chair of the Governance and
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2021

Transaction ID : SA11AI.5009

Amount of Each Receipt this Period
5000.00

Memo Item

C.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	7000.00
TOTAL This Period (last page this line number only).....	42721.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
HAWAIIAN AIRLINES INC POLITICAL ACTION COMMITTEE

A. CASE FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1253 S. BERETANIA ST., #8888

M M M	/	D D D	/	Y Y Y Y Y
06		10		2021

City HONOLULU State HI Zip Code 96814

FEC Identification Number

Purpose of Disbursement

011
Category/ Type

C	C00680918
---	-----------

Transaction ID : SB23.4996

Amount of Each Disbursement this Period

2500.00

Candidate Name

CASE, ED, , ,

Office Sought: House Senate President

Disbursement For: 2022 Primary General Other (specify) ▼

State: HI District: 01

Memo Item

B. HAWAII PAC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 918 PENNSYLVANIA AVE SE

M M M	/	D D D	/	Y Y Y Y Y
03		25		2021

City WASHINGTON State DC Zip Code 20003

FEC Identification Number

Purpose of Disbursement

011
Category/ Type

C	S4HI00136
---	-----------

Transaction ID : SB23.4999

Amount of Each Disbursement this Period

5000.00

Candidate Name

SCHATZ, BRIAN, , ,

Office Sought: House Senate President

Disbursement For: 2022 Primary General Other (specify) ▼

State: HI District: 00

Memo Item

C. KAHELE FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. 4952

M M M	/	D D D	/	Y Y Y Y Y
06		10		2021

City HILO State HI Zip Code 96720

FEC Identification Number

Purpose of Disbursement

011
Category/ Type

C	C00694604
---	-----------

Transaction ID : SB23.5000

Amount of Each Disbursement this Period

2500.00

Candidate Name

KAHELE, KAIALI'I, , ,

Office Sought: House Senate President

Disbursement For: 2022 Primary General Other (specify) ▼

State: HI District: 02

Memo Item

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

10000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
HAWAIIAN AIRLINES INC POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. PINEAPPLE PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2021

Mailing Address PO BOX 15293

FEC Identification Number

C S2H100106

City WASHINGTON State DC Zip Code 20003

Transaction ID : SB23.5001

Purpose of Disbursement

011
Category/
Type

Amount of Each Disbursement this Period

5000.00

Candidate Name
HIRONO, MAZIE K., , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: HI District: 00

Memo Item

Full Name (Last, First, Middle Initial)

B. SINEMA FOR ARIZONA

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		10		2021

Mailing Address PO BOX 7586

FEC Identification Number

C C00508804

City PHOENIX State AZ Zip Code 85011

Transaction ID : SB23.4993

Purpose of Disbursement

011
Category/
Type

Amount of Each Disbursement this Period

900.00

Candidate Name
SINEMA, KYRSTEN, , ,

Office Sought: House Senate President
Disbursement For: 2024 Primary General Other (specify) ▼
State: AZ District: 00

Memo Item

Full Name (Last, First, Middle Initial)

C. SINEMA FOR ARIZONA

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		10		2021

Mailing Address PO BOX 7586

FEC Identification Number

C C00508804

City PHOENIX State AZ Zip Code 85011

Transaction ID : SB23.4994

Purpose of Disbursement

011
Category/
Type

Amount of Each Disbursement this Period

1600.00

Candidate Name
SINEMA, KYRSTEN, , ,

Office Sought: House Senate President
Disbursement For: 2024 Primary General Other (specify) ▼
State: AZ District: 00

Memo Item

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

7500.00

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

17500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
HAWAIIAN AIRLINES INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Okinaka, Shannon, L., ,

Mailing Address 3375 Koapaka St
Suite G350

City Honolulu State HI Zip Code 96819

Purpose of Disbursement refund of excess contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement MM / DD / YYYY
04 / 22 / 2021

FEC Identification Number C

Transaction ID : SB28A.5024

Amount of Each Disbursement this Period 2000.00

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement MM / DD / YYYY

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement MM / DD / YYYY

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

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