

FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

RECEIVED  
2012 MAY -1 AM 9:04  
FEC MAIL CENTER  
Office Use Only

1. NAME OF  
COMMITTEE (in full)

(Check if name  
is changed)

Example: If typing, type  
over the lines.

12FE4M5

UNIVERSITY OF HAWAII PROFESSIONAL ASSEMBLY

ADDRESS (number and street)

1017 PALM DR

(Check if address  
is changed)

HONOLULU

HI

96814

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address  
is changed)

kris@uhpa.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address  
is changed)

www.uhpa.org

2. DATE

04<sup>M</sup> / 24<sup>D</sup> / 2012

3. FEC IDENTIFICATION NUMBER

C To Be Assigned

4. IS THIS STATEMENT



NEW (N)

OR



AMENDED (A)

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

Type or Print Name of Treasurer

Paulette Feeney

Signature of Treasurer

*Paulette Feeney*

Date

04<sup>M</sup> / 24<sup>D</sup> / 2012

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office  
Use  
Only

For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

FEC FORM 1  
(Revised 02/2009)

12030800227

5. TYPE OF COMMITTEE

Candidate Committee:

- (a)  This committee is a principal campaign committee. (Complete the candidate information below.)
- (b)  This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate \_\_\_\_\_

Candidate Party Affiliation \_\_\_\_\_ Office Sought:  House  Senate  President State \_\_\_\_\_  
 District \_\_\_\_\_

- (c)  This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate \_\_\_\_\_

Party Committee:

- (d)  This committee is a \_\_\_\_\_ (National, State or subordinate) committee of the \_\_\_\_\_ (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e)  This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
  - Corporation  Corporation w/o Capital Stock  Labor Organization
  - Membership Organization  Trade Association  Cooperative
  - In addition, this committee is a Lobbyist/Registrant PAC.
- (f)  This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
  - In addition, this committee is a Lobbyist/Registrant PAC.
  - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. \_\_\_\_\_ FEC ID number: C \_\_\_\_\_
2. \_\_\_\_\_ FEC ID number: C \_\_\_\_\_
3. \_\_\_\_\_ FEC ID number: C \_\_\_\_\_
4. \_\_\_\_\_ FEC ID number: C \_\_\_\_\_

12030800228

Write or Type Committee Name

UNIVERSITY OF HAWAII PROFESSIONAL ASSEMBLY

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

NONE

Mailing Address

Grid for mailing address information

CITY

STATE

ZIP CODE

Relationship: [ ] Connected Organization [ ] Affiliated Committee [ ] Joint Fundraising Representative [ ] Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Linda Sawai

Mailing Address

Grid for Linda Sawai's address: c/o UHPA, 1017 Palm Dr, Honolulu, HI, 96814

Title or Position

CITY

STATE

ZIP CODE

Comptroller

Telephone number 808 - 593 - 2157

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer

Paulette Feeney

Mailing Address

Grid for Paulette Feeney's address: c/o UHPA, 1017 Palm Dr, Honolulu, HI, 96814

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number 808 - 593 - 2157

12030800229

Full Name of Designated Agent

[Empty grid for Full Name of Designated Agent]

Mailing Address

[Empty grid for Mailing Address line 1]

[Empty grid for Mailing Address line 2]

[Empty grid for Mailing Address line 3]

CITY

STATE

ZIP CODE

Title or Position

[Empty grid for Title or Position]

Telephone number

[Empty grid for Telephone number]

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Bank of Hawaii

Mailing Address

111 S King St

[Empty grid for Mailing Address line 2]

Honolulu HI 96813

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Empty grid for Name of Bank, Depository, etc.]

Mailing Address

[Empty grid for Mailing Address line 1]

[Empty grid for Mailing Address line 2]

[Empty grid for Mailing Address line 3]

CITY

STATE

ZIP CODE

12030800230



Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

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Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date  
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

*JNW*  
PREPARER

5/1/12  
DATE PREPARED

12030800232