

# 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**  
Hawaii PAC

ADDRESS (number and street) 918 Pennsylvania Avenue SE  
Check if different than previously reported. (ACC) Washington DC 20003

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C** C00567693 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

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)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Zamore, Judith, , ,  
Type or Print Name of Treasurer

Signature of Treasurer Zamore, Judith, , , [Electronically Filed] Date  /  /

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)

Write or Type Committee Name

Hawaii PAC

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="2018"/>	<input type="text" value="32860.30"/>	<input type="text" value="32860.30"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="41006.97"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="7000.00"/>	<input type="text" value="258714.76"/>
(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="48006.97"/>	<input type="text" value="291575.06"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="10739.77"/>	<input type="text" value="254307.86"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="37267.20"/>	<input type="text" value="37267.20"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> 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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Hawaii PAC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1000.00	46639.76
(ii) Unitemized .....	0.00	175.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1000.00	46814.76
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	6000.00	194250.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	7000.00	241064.76
12. Transfers From Affiliated/Other Party Committees.....	0.00	17650.00
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)).....▶	7000.00	258714.76
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	7000.00	258714.76

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	5739.77	122207.86
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	5739.77	122207.86
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	131350.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	750.00
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)) ..	10739.77	254307.86
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10739.77	254307.86

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	7000.00	241064.76
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7000.00	241064.76
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	5739.77	122207.86
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	5739.77	122207.86

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

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

FOR LINE NUMBER: PAGE 6 OF 10  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**Hawaii PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Singer, Jonathan, , ,**

Mailing Address 1099 22Nd St NW  
Apt 308

City Washington State DC Zip Code 20037-1822

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

Name of Employer (for Individual) O'Melveny & Myers LLP Occupation (for Individual) Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 09 / 2018  
**Transaction ID : VN8EMK1GW13**

Amount of Each Receipt this Period 1000.00

Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. ACTBLUE**

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 (for Individual) Occupation (for Individual) Conduit total listed in Agg. field

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 14 / 2018  
**Transaction ID : VN8EMK1GW13E**

Amount of Each Receipt this Period 1000.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

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

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).....▶	1000.00

**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 7 OF 10
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Hawaii PAC**

**A. T-Mobile PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 601 Pennsylvania Ave NW  
Ste 800 N Bldg

City Washington State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C** C00361758

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
10 / 02 / 2018  
**Transaction ID : VN8EMJV9N03**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B. Ford Motor Company Civic Action Fund**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 75000

City Detroit State MI Zip Code 48275-0001

FEC ID number of contributing federal political committee. **C** C00046474

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
10 / 02 / 2018  
**Transaction ID : VN8EMJV9MT5**

Amount of Each Receipt this Period  
2500.00

Memo Item

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

Mailing Address 1001 N Fairfax St  
Ste 501

City Alexandria State VA Zip Code 22314-1587

FEC ID number of contributing federal political committee. **C** C00249532

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
10 / 02 / 2018  
**Transaction ID : VN8EMJV9MX9**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	6000.00

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

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NAME OF COMMITTEE (In Full)  
**Hawaii PAC**

Full Name (Last, First, Middle Initial)

**A. Capitol Compliance Associates**

Mailing Address PO Box 15293

City  
Washington

State  
DC

Zip Code  
20003-0293

Purpose of Disbursement  
Compliance Services & Expense Reimbursement

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			02			2018			

FEC Identification Number

**C** [ ]  
**Transaction ID : VN7FCACBB**  
Amount of Each Disbursement this Period  
[ ] 5684.29 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**B. The Kahala Hotel & Resort**

Mailing Address 5000 Kahala Ave

City  
Honolulu

State  
HI

Zip Code  
96816-5411

Purpose of Disbursement  
Catering & Facility Rental

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			02			2018			

FEC Identification Number

**C** [ ]  
**Transaction ID : VN7FCACBB**  
Amount of Each Disbursement this Period  
[ ] 3284.29 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C. Capitol Compliance Associates**

Mailing Address PO Box 15293

City  
Washington

State  
DC

Zip Code  
20003-0293

Purpose of Disbursement  
Compliance Services

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			02			2018			

FEC Identification Number

**C** [ ]  
**Transaction ID : VN7FCACBB**  
Amount of Each Disbursement this Period  
[ ] 2400.00 [ ]

Memo Item

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

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

[ ] 5684.29 [ ]
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[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]
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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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Hawaii PAC**

Full Name (Last, First, Middle Initial) <b>A. O'Beirne, Max, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018
Mailing Address 220 I St NE Ste 110		FEC Identification Number C [ ] <b>Transaction ID : VN7FCACBB</b> Amount of Each Disbursement this Period [ ] 15.98
City Washington	State DC	Zip Code 20002-4365
Purpose of Disbursement Reimbursement, memos below if itemized		Category/ Type [ ]
Candidate Name		
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Actblue Technical Services</b>		Date of Disbursement MM / DD / YYYY 10 / 14 / 2018
Mailing Address 366 Summer St		FEC Identification Number C [ ] <b>Transaction ID : VN7FCAC4CF</b> Amount of Each Disbursement this Period [ ] 39.50
City Somerville	State MA	Zip Code 02144-3132
Purpose of Disbursement Merchant Fees		Category/ Type [ ]
Candidate Name		
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY [ ] / [ ] / [ ]
Mailing Address		FEC Identification Number C [ ] Amount of Each Disbursement this Period [ ]
City	State	Zip Code
Purpose of Disbursement		Category/ Type [ ]
Candidate Name		
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:	<input type="checkbox"/> Memo Item	

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

55.48

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

5739.77

# 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)  
**Hawaii PAC**

**A. Indiana Democratic Congressional Victory Committee**

Full Name (Last, First, Middle Initial)

Mailing Address 115 W Washington St  
Ste 1165

City Indianapolis State IN Zip Code 46204-3418

Purpose of Disbursement Contribution

Candidate Name Indiana Democratic Congressional Victory Committee

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

State: District:

Date of Disbursement: 10 / 11 / 2018

FEC Identification Number: C00108613  
Transaction ID : VN7FCACBB

Amount of Each Disbursement this Period: 5000.00

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  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

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  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5000.00