RECEIVED

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

2010 OCT 27 AM 8: 13 FEC MAIL CENTER

FEC FORM 3X

Rev. 12/2004

For Other Than An Authorized Committee Office Use Only TYPE OR PRINT ▼ Example: If typing, type NAME OF 12FE4M5 COMMITTEE (in full) over the lines. ADDRESS (number and street) Check if different than previously $\tilde{\gamma}_1,...\tilde{\gamma}_r'$ N Z reported. (ACC) CITY A STATE A ZIP CODE FEC IDENTIFICATION NUMBER ▼ 3. IS THIS NEW **AMENDED** C 00485136 OR REPORT (N) (A) TYPE OF REPORT (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Electi Year Only) Report (Choose One) Due On: Dec 20 (M12) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (Non-Election Year Only) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report (Q1) (c) 12-Day Primary. (12P) General (12G) Runoff (12R) **PRE-Election** Quarterly Report (Q2) Report for the: Convention (12C) Special (12S) October 15 Quarterly Report (Q3) in the January 31 Election on State of Year-End Report (YE) July 31 Mid-Year 30-Day Report (Non-election **POST-Election** General (30G) Runoff (30R) Special (30S) Year Only) (MY) Report for the: Termination Report (TER) in the Election on State of Care. 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. Type or Print Name of Treasurer Date Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

FE6AN026

Office

Use

Only

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS Page 2 FEC Form 3X (Rev. 02/2003) Write or Type Committee Name To: Report Covering the Period: From: ----**COLUMN A COLUMN B** Calendar Year-to-Date This Period (a) Cash on Hand (b) Cash on Hand at Beginning of Reporting Period..... (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) Total Disbursements (from Line 31)...... Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) 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

(T) 1005048032

W	rite or Type Committee Name Rona Teu Pa	Rty PAC	
R	1 O	PATRICIA DE LA TRANSPORTACIONE	10 21 2010
	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	1 CLAN AM	1 1 80 06
	(i) Itemized (use Sahedule A)	140000	1,4600
		一、"我们的,我们就是我们的。""我们的这个人,我们的一个女孩,他们就是我们的 没有 了。""我们的,我们们是这一	
	(ii) Unitemized	38000	, 430 90
	(iii) TOTAL (add	o gilikarija. Pir karolo ir gestore igrane igranistativamo gorija.	1070 0
	Lines 11(a)(i) and (ii)▶	1.78000	1,830, 2
		The first of the control of the cont	The second secon
•	(b) Political Party Committees		المراكز والأراد والانتخاب الأهماء ويراسي والمسافح والراكز والمارا
	(c) Other Political Committees		
	(such as PACs)	The configuration of the control of the state of the control of th	
	(d) Total Contributions (add Lines	129000	•
	11(a)(iii), (b), and (c)) (Cany	paging the organic control of the co	more the second of the second
	Totals to Line 33, page 5)▶	1,780.00	18300
12.	Transfers From Affiliated/Other	and the second s	managa aya aya aya aya aya aya aya aya aya
	Party Committees	<i>-0</i> -	-0-
		and the field of the state of t	
13.	All Loans Received	-0-	~ O F
		 a for the control of th	The state of the s
14	Loan Repayments Received	-0-	_0-
	Offsets To Operating Expenditures	Section 1 and meaning the first transfer	The strength of the second strength of the second s
٠٠.	(Refunds, Rebates, etc.)	ing proving proving provincial and the state of the state	And the American Control of the Cont
	(Carry Totals to Line 37, page 5)	-0-	_^ -
16	Refunds of Contributions Made	and the state of t	Constitution and From more problems of the Constitution of the
٠٠.	to Federal Candidates and Other	in disease in the content of the mean of the content of the conten	A Principle Control of the Serger of the analysis of the Control o
	Political Committees		_ 0 ~
17	Other Federal Receipts	and the second s	and the state of t
• • •	(Dividends, Interest, etc.)	70 -	Experience in the control function of the control for the control for the
ıΩ	Transfers from Non-Federal and Levin Funds	Strate to the same to the strate of	to the compression of the Contraction
10.	(a) Non-Federal Account		
	(from Schedule H3)		
	(Nom Schedule 115)	and the second of the second o	and the second of the control of the second
		and deput for the second production of space of the second	and the second managers are in the second of
	(b) Levin Funds (from Schedule H5)		
		Prince in Agriculture in the Committee i	A control distance particular control of the contro
	(c) Total Transfers (add 18(a) and 18(b))		_0-
		A Section of the Control of the Cont	and the state of t

20. Total Federal Receipts (subtract Line 18(c) from Line 19)▶

FE6AN026

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1. 0	perating Expenditures:	10011111011011	04.0.144. 704. 10 24.0
(E	Allocated Federal/Non-Federal	Higgster Highes (1994) and make the second of the second o	s operator who are light translation as given we are apply of the wealth of the light
	Activity (from Schedule H4)	12825	-12225
	(i) Federal Share	1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	The state of the s
	(ii) Non-Federal Share	~ 0 -	- 05
(t	o) Other Federal Operating	· · · · · · · · · · · · · · · · · · ·	က ရုပ္သည္ေတြ သည္။ အေတြ သည္။ အေတြ မို႔သည္။ အေတြ အေတြ သည္။ က ရွားမတ္ေတြ လုပ္သည့္ သည္။ သည္။ အေတြ အေတြ အေတြ အေတြ အေတြ အေတြ အေတြ အေတြ
,-	Expenditures	_ 0-	- 0.5
(c	c) Total Operating Expenditures	(a) A supplied of public points of the public property of the public	- The Control of the American American American American American American American American American American - The American
,,	(add 21(a)(i), (a)(ii), and (b))▶		_ 0 ~
) T	ransfers to Affiliated/Other Party	Singular Company of the Company of t	 Specific of president of a property of the second of the se
	Committees	-0-	- 0 -
i. C	contributions to		and the second of the second o
F	ederal Candidates/Committees nd Other Political Committees	- D-	- 0-
	nd Other Political Committees		The state of the s
	•	_0	207
i, C	use Schedule E) Coordinated Party Expenditures	The state of the s	Region of the American Martine Contraction
(2	2 U.S.C. §441a(d))	_0~	~01
(L	use Schedule F)	and some area to the contract of the contract	Tandard got the contract of th
	Dominion to the d		in the second of
5. Lo	oan Repayments Made	Commence of the Commence of th	The second of th
			and the contract of the contra
	oans Madelefunds of Contributions To:		
	a) Individuats/Persons Other		arrana yeen sanan da liigu liin is liigu liig
•	Than Political Committees		
(b	o) Political Party Committees	, -0	
(C	c) Other Political Committees	g konservicina kiristoria. Salata kiristoria kiristoria kiristoria kiristoria kiristoria kiristoria kiristoria	
	(such as PACs)	,0	The second of the sea Const.
			Committee of the commit
(d	d) Total Contribution Refunds	entropy and the control of the contr	and the state of a supplication of the state
	(add Lines 28(a), (b), and (c)) ▶	, _ @ ;	
		in the second of	en en militario (1964) de la marcalità de la compania de la compania de la compania de la compania de la compa La compania de la co
. 0	ther Disbursements	120000	
		The Company of the Co	The same of the sa
. Fo	ederal Election Activity (2 U.S.C. §431(20))	
(a	a) Allocated Federal Election Activity		
-	(from Schedule H6)	Brown Markey and the control of the	tion of the more managed statement of calcement against as
	(i) Federal Share		· - 0 -
		 Bulletiness (1984). Provides and Partition Partition for a partial control of the provides of the	- Arte (Company Manager Lage Resource Lage 代の大大 - Arte (Manager Lage Company Lage Company Company Company Company Company Company Company Company Company Comp
	(ii) "Levin" Share	~ 0 ~	-0-
(h	b) Federal Election Activity Paid Entirely	 Both of a gift of the second of	The Crowning Strain County of the County of
,,,	With Federal Funds	-0-	-0-
(c	e) Total Federal Election Activity (add	The state of the s	The state of the s
,0	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	-0-	-0-
	בוופס טטנמאנון, טטנמאנון מווט טטנטן)	The control of the co	and provided the strain of the filters of the the same
T/	otal Disbursements (add Lines 21(c), 22,		
	3, 24, 25, 26, 27, 28(d), 29 and 30(c))	120001	SOM
23	, 27, 25, 20, 27, 20(U), 23 BIIU 30(C))	3 3000) 50 P. C.
-	stal Fadavat Diahuwaan asta		The state of the s
	otal Federal Disbursements		
-	subtract Line 21(a)(ii) and Line 30(a)(ii)	ninkani Prikada ili kili ninin ili kili ninin ninin naman anamalah distribution di traffic	
fr	om Line 31)		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)		Page 5
III. Net Contributions/Operating penditures	g Ex- COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loar (from Line 11(d), page 3)	170000	183000
34. Total Contribution Refunds	german ja segar in die die die deutsche opperatie der der Auftrage	 A service of the servic
(from Line 28(d))	s)	
35. Net Contributions (other, than loans		1 00 - 00
(subtract Line 34 from Line 33)	1,780.00	1830 00
36. Total Federal Operating Expenditur	1,780.00	
(add Line 21(a)(i) and Line 21(b)).		7 3 Since 1
37. Offsets to Operating Expenditures		1911-
(from Line 15, page 3)	132825	134675
38. Net Operating Expenditures		
(subtract Line 37 from Line 36)	45778	45775

SCHEDUL	EA	(FEC	Form	3X)
ITEMIZED	REC	EIPTS	}	

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS	for each category of the	11a 11b 11c 12
	Detailed Summary Page	13 14 15 16 17
Any information copied from such Reports and Statemer or for commercial ourposes, other than using the name	its may not be sold or used by any pe and address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Kona Tea Parti	PAC	
Full Name (Last, First, Middle Initial) A. Hatt Bob Mailing Address 74-5599 Pawai PL City Sta Kailua Kona M	ace Zip Code T 96740	Date of Receipt Date of Receipt Date of Rec
FEC ID number of contributing federal political committee.	N/A	120000
PFI Rubbish Sofice &	pation Sarbage Mary. egate Year-to-Date ▼	
Primary General Other (speoffy)	12,800,00	
Full Name (Last, First, Middle Inifial). B. Dr. Denna (Inifial). Mailing Address For 5182		Date of Receipt
Kailus. Kona sta	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	D 96745	2000
Name of Employer Copy Receipt For: Aggregation	pation HPLEL gate Year-to-Date ▼	
Primary General Other (specify) ▼	ADO00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		THE RESERVE OF THE PROPERTY OF
City Stat	e Zip Code	- in the state of the state of
FEC ID number of contributing		Amount of Each Receipt this Period
federal political committee.	150 - Allemander ()	Francisco de la companya del companya de la companya del companya de la companya
Name of Employer Occup	ation	
Primary General	gate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)		140000
	1400 <u>00</u>	
TOTAL This Period (last page this line number only)	1,700 -	

SCHEDULE B (FEC Form 3X)	r	T ====		PAGE 7 OF 7
ITEMIZED DISBURSEMENTS	Use separate schedule(s)		NE NUMBER: only one)	PAGE OF
TEMELE BIODOTTOLINE.TTO	for each outegriry of the Detailed Summary Page	1 4	21b 22 27 28a	23 24 25 26 28b 28c 29 30i
Any information copied from such Reports and States	nents may not be sold or use			
or for commercial purposes, other than using the name	ne and address of any politic	al committe	e to solicit contri	hutions from such committee.
Rona Vea	Party			
Full Name (Last, First, Middle Initial) A. Least. Becky	. [isbursement
Mailing Address 8 390544	^		10	08 2015
City	State Zip Code F 9673	 9		
Purpose of Disbursement	+ 1612			/ Fack Distance and distance
Candidate Name		Category		f Each Disbursement this Period
Office Sought: W House Disburser	nent For:	Туре		4000
Senate President	Primary General Other (specify)			
State: District:	Other (specify)			
Full Name (Last, First, Middle Initial) B. T)		Date of D	isbursement
John Willough	John Willoughby			14 2070
Mailing Address PD Bay 24	J		/0	
Kailus	State Zip Code #1 96734 -	0029	4	
Purpose of Disbusement			· Amount o	f Each Disbursement this Period
Candidate Name		Category		46000
Office Sought: House Usbursen		Туре		y who will a self-self-self-self-self-self-self-self-
	Primary General Other (specify)			
State: District:		~~~~~		
Full Name (Last, First, Middle Initial) C.			Date of D	isbursement
cam cavasso			7.8	15 2010
Mailing Address Nauana A	ry Switter C	- 		
Honolu lu	tate Zip Code	>		
Purpose of Disbursement Din ation	furpose of Disbursement		Amount of	Each Disbursement this Period
Candidate Name		Category/		40000
Office Sought: House Disburserr	·	- 1,700	- 1 Pro-	and the commence of the Tradition of the second of the se
	Primary General Other (specify)			
State: District:				
SUBTOTAL of Disbursements This Page (optional)			₽	, 120000

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

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SCHEDULE C (FEC Form 3X)	
OANS	Use separate schedule(s) PAGE OF for each category of the
·	Detailed Summary Page FOR LINE 13 OF FORM 3X
Kona Tea Parity 1	PAC
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election:
Mailing Address	Primary General Other (specify) ▼
City State	ZIP Code
	ment To Date Balance Outstanding at Close of This Pe
TERMS	ate Due Interest Rate Secured:
WORKS A TOTAL A TOTAL A MANAGE A CONTRACT A	ate Due Interest Rate Secured:
List All Endorsers or Guarantors (if any) to Loan Source	
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount prometically a grown and grown and
City State ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
*	
City State ZIP Code	Amount Guaranteed Outstanding: The William of the Control of the William of the
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
Chat. 7ID Co. I.	Amount (1994 1994) The Control of the American Inglish Committee of the Control o
City State ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)	Summer of the state of the stat

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

TOTALS This Period (last page in this line only)......

SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on				
Information	found on			
Page	of Schedule			

Federal Election Commission, Washington, D.C. 20463 **FEC IDENTIFICATION NUMBER** NAME OF COMMITTEE (In Full) C00485 Amount of Loan Interest Rate (APR) Full Name . . . N . . . Antonia agrica (Aberra) 💌 maalis Amerika المن 🖰 و در از مین کامور و 📞 سال مستخدی و 🕏 د د 🖰 . Mailing Address Date Incurred or Established City Zip Code Date Due A. Has loan been restructured? No If yes, date originally incurred Total B. If line of credit, Outstanding Balance: Amount of this Draw: C. Are other parties secondarily liable for the debt incurred? (Endorsers and guarantors must be reported on Schedule C.) Yes What is the value of this collateral? D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, 6 July 22 stocks, accounts receivable, cash on deposit, or other similar traditional collateral? a de la compresión de la c Yes If yes, specify: Does the lender have a perfected security interest in it? No E. Are any ruture contributions or future receipts of interest income, pledged as What is the estimated value? collateral for the loan? Ne Yes If yes, specify: the control of a group of states, there is not become The Albert Control of the Control of the State of Location of account: A depository account must be established pursuant to 11 CFR 100.82(o)(2) and 100.142(e)(2). Address: Date account established: M M / D' B' L Y Y Y Y M'Y' City. State. Zip: F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment. G. COMMITTEE TREASURER DATE Typed Name Signature Attach a signed copy of the loan agreement. TO BE SIGNED BY THE LENDING INSTITUTION: To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set torth at 11 CFR 100.82 and 100.142 in making this loan. AUTHORIZED REPRESENTATIVE DATE Typed Name $M = \{M_{i,j}, \lambda_{i,j}\} \setminus \{D_{i,j}, D_{i,j}, \lambda_{i,j}, \lambda_$ Signature Title

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

(Use separate schedule(s) for each numbered line) PAGE / OF
FOR LINE NUMBER:
(chack only one)

cluding Loans		numbered line)	(Chack only one)	10
AME OF COMMITTEE (In Full) Howa Tea F	Easty PAL	·		
A. Full Name (Last, First, Middle Initial)	of Debtor of Creditor	Nature of D	ebt (Purpose):	
Mailing Address				
City State / //	Zip Code			
Outstanding Balance Beginning This Po	eriod Wind			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of	This Peri
Topic towards of the Alasa William Property of the Conference of t	er en	and the Breed of	e Balling Com/Magazine (197	^{M*}
B. Full Name (Last, First, Middle Initial) o	of Debtor or Creditor	Nature of D	ebt (Purpose):	
Mailing Address				
City State	Zip Code			
Outstanding Balance Beginning This Po	eriod			
Amount Incurred This Period	Payment This Period	Outstandii	ng Balance at Close of	This Perio
	And Andrew State of the Company of t		н н Атнаш Андер (С. н. (ЗА) г. г. г. г. г.	u • v sy
C. Full Name (Last, First, Middle Initial)	of Debtor or Creditor	Nature of D	ebt (Purpose):	
Mailing Address				
City	State Zip Code			
Outstanding Balance Beginning This Pe	•••· ·			
Amount Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of	This Perio
. !	Samuel Sa	:	Free Constitution 2 sea 1 1 11	
SUBTOTALS This Period This Page (op	tional)			
TOTALS This Period (last page this line	number only)		 2 specificación (10 cm) contractor (10 cm) 30 cm (10 cm) 30 cm (10 cm) 30 cm) 	
TOTAL OUTSTANDING LOANS from So	chedule C (last page only)		ra (province of the control of the c	
ADD 2) and 3) and carry forward to app	propriate line of Summary Page (last page only	A >	- 1 3 5 - 14	

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

EMIZED INDEPENDENT EXPENDITURES			PAGE 1 OF 1 FOR LINE 24 OF FORM 3X
AME OF COMMITTEE (In Full) Lowa Sec Party Check if 24-hour notice 48-hour notice	PAC		FEC IDENTIFICATION NUMBER ▼ CO-0485136
Full Name (Last, First, Middle Initial) of Payee		Date	
Mailing Address			MITHELY FOR TOO A TWO PER WINTER THE THE THE THE THE THE THE THE THE THE
City State	Zip Code	l	in the state of th
Purpose of Expenditure	Category/ Type	Office Sou	Senate District:
Name of Federal Candidate Supported or Opposed by Expendi	ture:	Check One	President Support Oppese
Calendar fear-10-Date Fer Election	eren i grande erene ig Light eren grande erene i	Disburseme	ent For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payea		Date	Říme z řo bězz,*ýrtv tv v ;
Mailing Address		Amo	
City State	Zip Code		The state of the s
Purpose of Expenditure	Category/ Type	Office Sou	Senate District:
Name of Federal Candidate Supported or Opposed by Expendi	ture:	Check One	President Support Oppose
Oaleridal real-10-Date Fer Liection	en Service de la companya de la comp La companya de la co	Disburseme	ent For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		• · · · · · · · · · · · · · · · · · · ·	o menaj menagojomas karak kalendo objekto kalendo objekto obj
(b) SUBTOTAL of Unitemized Independent Expenditures		► Sometimes	e de la composición del composición de la composición de la composición del composición de la composic
(c) TOTAL Independent Expenditures			 (1) (大きなないないからからないないからない。 (2) (2) (3) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
Under penalty of perjury I certify that the independent expenditu with, or at the request or suggestion of, any candidate or authority party committee) any political party committee or its agent.	res reported herein were r zed committee or agent of	not made in either, or (if	cooperation, consultation, or concert the reporting entity is not a political
Signature	Date	Om W//	O' O O V O V O V V V
- Cignature		- "	· · · · · · · ·

SCHEDULE F (FEC Form 3X) ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S) ON BERALF OF CANDIDATES FOR FEDERAL OFFICE

ON BERALF OF CANDIDATES FOR FEDERAL OFFICE PAGE OF (2 U.S.C. §441a(d)) FOR LINE 25 OF FORM 3X (To be used only by Political Committees in the General Election) NAME OF COMMITTEE (In Full) Has your committee been designated to make coordinated expenditures by a political party committee? YES X NO If YES, name the designating dommittee: ZIP Code City Purpose of Expenditure Full Name (Last, First, Middle Initial) of Each Payee Category/ Type Mailing Address Date Zip Code State City Name of Federal Candidate Supported Office Sought: House State: Amount Senate District: Presidential والسابات والمناز والوسطي Aggragate General Election Expenditure for this Candidate Purpose of Expenditure Full Name (Last, First, Middle Initial) of Each Payee Category/ Mailing Address Type Date City Zip Code State 4 : M - / [0 12 0 Name of Federal Candidate Supported Office Sought: House State: Senate District: Presidential Aggregate General Election Expenditure for this Candidate Purpose of Expenditure Full Name (Last, First, Middle Initial) of Each Payee Category/ Mailing Address Type Date State Zip Code Name of Federal Candidate Supported Office Sought: House State: Amount Senate District: Presidential Aggregate General Election Expenditure for this Candidate and the artistation of the water and the street the SUBTOTAL of Expenditures This Page (optional)..... TOTAL This Period (last page this line number only)...... 223 my

SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)

Kona Tea Party PAC				
USE ONLY ONE SECTION, A or B				
A. State and Local Party Committees				
Fixed Percentage (select one)				
Presidential-Only Election Year (28% Federal)				
Presidential and Senate Election Year (36% Federal)				
Senate-Only Election Year (21% Federal)				
Non-Presidential and Non-Senate Election Year (15% Federal)				
B. Separate Segregated Funds and Nonconnected Committees Flat Minimum Federal Percentige If the committee will allocate using the flat minimum percentage of 50% federal funds, check or If the committee is spending more than 50% federal funds, indicate ratio below				
Federal % Nonfederal %				
This ratio applies to (check all that apply):				
Administrative Generic Voter Drive Public Communications Referencing Party Only	i vi			

SCHEDULE H2 (FEC Form 3X)		
ALLOCATION RATIOS		PAGE / OF /
NAME OF COMMITTEE (In Full)	,	
RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDA ACTIVITIES APPEARING ON THIS REPORT.	ATE SUPPORT	
Methods of allocation:		
 FUNDRAISING activities are allocated using the "funds received met expenses must equal the federal proportion of monies raised. 	thod" where the federal pr	roportion of
II. Shared DIRECT CANDIDATE SUPPORT activities are allocated according where the federal propertion of disbursements is based on the benefitivity. For PACs Only: Direct candidate support includes public commenderal and nonfederal candidates, regardless of whether there is a are allocated using a time/space method.	fit derived by federal cand nunications or voter drive:	didates from the ac- s that refer to both
ACTIVITY OR EVENT IDENTIFIER	FEDERAL N	NONFEDERAL
ACTIVITY IS:	FEDERAL %	NONFEDERAL %
Fundraising Direct Candidate Support	9%	- O %
CHECK IF THE RATIO IS:		
New Revised / Same as Previously Reported		
ACTIVITY OR EVENT IDENTIFIER		
ACTIVITY IS:	FEDERAL %	NONFEDERAL %
Fundraising Direct Candidate Support		- %
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Same as Previously Reported

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SCHEDULE H3 (FEC Form 3X) TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE	1	0	F	1	
FOR	LINE	18a	OF	FORM	3

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lv)	Direct Fundraising (List Activity or Event Ide	ntifier)			
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	b)	· · · · · · · · · · · · · · · · · · ·	0	The state of the s	is om mysminer () is a signal.
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v)	Direct Candidate Support (List Activity or Ev	ent Identifier)			
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vi)	Public Communications Referring Only to F	Party (Made by PAC)	The second secon	0-
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	This Period (Total Amount Transferred)				

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE	1	0	F	1	
FOR LI	NF	21a	OF	FORM	3X

NAME OF COMMITTEE (In Full)	y PA	C
A. Full Name (Last, First, Middle Initial)	1	Allocated Activity or Event:
		Administrative Fundraising Exempt
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Activity or Event Identifier:		the contract of the contract o
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		Voter Drive Direct Candidate Support
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C. Full Name (Last, First, Middle Initial)		Allocated Activity or Event:
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SCHEDULE H5 (FEC Form 3X)

TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, Sistrict and Local Party Committees Only)

PAGE	OF	7
FOR LINE	18b OF	FORM 3X

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Total Amount Transferred for GOTV	/ <u></u>	ė.			
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SCHEDULE H6 (FEC Form 3X) DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

PAGE		OF	1	
FOR LINE	30a	OF	FORM	3)

	<u> </u>		
AME OF COMMITTEE (In Full)			
Hong year way	74	The state of Assistance County	
A. Full Name (Last, First Middle Initial) / Full Organization Name		Type of Allocated Activity or Event: Voter Registration GOTV	
		Voter ID Generic Campaign	
Mailing Address		Allocated Activity or Event Year-To-Date	
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B. Full Name (Last, First, Middle Initial) / Full Organization Name		Type of Allocated Activity or Event:	
		Voter Registration GOTV Voter ID Generic Campaign	
Mailing Address		Allocated Activity or Event Year-To-Date	
City State Zip Code		The second of th	
Purpose of Disbursement	Category/ Type	$ \text{Date} \stackrel{\text{\tiny (i,j)}}{=} \text{\tiny (i,j)} \stackrel{\text{\tiny (i,j)}}{=} \tiny $(i,$	
FEDERAL SHARE + LEVIN SH	ARE	= TOTAL AMOUNT	
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C. Full Name (Last, First, Middle Initial) / Full Organization Name		Type of Allocated Activity or Event:	
		Voter Registration GOTV Voter ID Generic Campaign	
Mailing Address		Allocated Activity or Event Year-To-Date	
City State Zip Code	T	The was the state of the state	
Purpose of Disbursement	Category/ Type	Date	
FEDERAL SHARE + LEVIN SH		= TOTAL AMOUNT	
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SUBTOTAL of Shared Federal and Levin Activity This Page			
FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT			
OTAL This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))			
FEDERAL SHARE		TOTAL AMOUNT	
LEVIN SH	ARE	ing the state of t	
OTAL This Period for the Levin Share			

SCHEDULE L (FEC Form 3X) AGGREGATION PAGE: LEVIN FUNDS

NAM	E OF COMMITTEE (In Full)	Party PA	6
NAM	E OF ACCOUNT		
	- per	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
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SCHEDULE L-A (FEC Form 3X)

Use separate schedule(s)

PAGE

TEMIZED RECEIPTS OF LEVIN FUNDS	for each category of the Aggregation Page	FOR LINE NUMBER: 1a 2
Any information copied from such Reports and Statements may not b or for commercial purposes, other than using the name and address	ne sold or used by any perso of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME GECOMMITTEE (In Full) Sona Jea Pagety	PAC	
Full Name (Last, First, Middle Initial) / Full Organization Name		Date of Receipt
Mailing Address		M M / O D / Y Y Y
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SCHEDULE L-B (FEC Form 3X)

FOR LINE NUMBER: PAGE 1 OF 1

ITEMIZED DISBURSEMENTS OF LEVIN FUNDS	for each category of the Aggregation Page	(check only one) 4a 4c 5
Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add	not be sold or used by any perso ress_of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Kona Tea Party	PAC	
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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. Date of Receipt Hand Delivered Postmarked **USPS First Class Mail** 10/21/10 Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS** Priority Mail Delivery Confirmation™ or Signature Confirmation™ Label **Postmarked USPS** Express Mail Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): Next Business Day Delivery **Date of Receipt** 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 or Postmarked Other (Specify): PREPARER