

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

PAGE 1 OF 4
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) University of Hawaii Professional Assembly		FEC IDENTIFICATION NUMBER C C00520262	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on		MM / DD / YYYY 12 / 13 / 2012	

Full Name (Last, First, Middle Initial) of Payee Daylight Communications, Inc.		Date 07 / 26 / 2012	
Mailing Address 96 County Road		Amount 12091.03	
City Ipswich	State MA	Zip Code 01938-2525	Transaction ID : SE.4195
Purpose of Expenditure Direct mail piece 'Difference' (mailed on 07/26/12)	Category/Type 006	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: HI District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: EDWARD ESPENETT CASE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 229077.94		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Dean Lucas		Date 07 / 24 / 2012	
Mailing Address 157 Kihapai St		Amount 1847.12	
City Kailua	State HI	Zip Code 96734	Transaction ID : SE.4197
Purpose of Expenditure Consulting services from 07/26/12	Category/Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: HI District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: EDWARD ESPENETT CASE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 211735.28		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	13938.15
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Catherine T. Bye
Signature _____ [Electronically Filed] Date **02 / 14 / 2013**

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SE

Transaction ID : SE.4195

Mailed on 07/27/12

Form/Schedule:

Transaction ID:

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

NAME OF COMMITTEE (In Full) University of Hawaii Professional Assembly	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00520262 </div>
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on	
<div style="display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y Y Y 12 / 13 / 2012 </div>	

Full Name (Last, First, Middle Initial) of Payee KHON	Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 07 / 24 / 2012 </div>		
Mailing Address 88 Piikoi St	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 3293.19 </div>		
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City Honolulu</td> <td style="width:33%;">State HI</td> <td style="width:33%;">Zip Code 96814</td> </tr> </table>		City Honolulu	State HI
City Honolulu	State HI	Zip Code 96814	
Purpose of Expenditure Television ad (begins airing on 07/26/12)	Category/Type 004	Office Sought: <input type="checkbox"/> House State: HI <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: EDWARD ESPENETT CASE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 209888.16 		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Transaction ID : SE.4198

Full Name (Last, First, Middle Initial) of Payee KITV4	Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 07 / 23 / 2012 </div>		
Mailing Address 801 S King St	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 3404.45 </div>		
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City Honolulu</td> <td style="width:33%;">State HI</td> <td style="width:33%;">Zip Code 96813</td> </tr> </table>		City Honolulu	State HI
City Honolulu	State HI	Zip Code 96813	
Purpose of Expenditure Television Ads (begins airing 07/26/12)	Category/Type 004	Office Sought: <input type="checkbox"/> House State: HI <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: EDWARD ESPENETT CASE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 206594.97 		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Transaction ID : SE.4196

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 6697.64 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; height: 20px;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; height: 20px;"> </div>

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Catherine T. Bye

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
02 / 14 / 2013

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NAME OF COMMITTEE (In Full) University of Hawaii Professional Assembly	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00520262 </div>
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on	
<div style="display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y Y Y 12 / 13 / 2012 </div>	

Full Name (Last, First, Middle Initial) of Payee US Postal Service		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 07 / 26 / 2012 </div>
Mailing Address 3600 Aolele St		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">8277.98</div>
City Honolulu State HI Zip Code 96820		
Purpose of Expenditure Postage for Ed Case mailing #2	Category/Type 006	Office Sought: <input type="checkbox"/> House State: HI <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: EDWARD ESPENETT CASE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 237355.92		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : SE.4200

Full Name (Last, First, Middle Initial) of Payee		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address		Amount <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
City _____ State _____ Zip Code _____		
Purpose of Expenditure	Category/Type 	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div> <div style="border: 1px solid black; padding: 2px; text-align: right;">8277.98</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div> <div style="border: 1px solid black; padding: 2px; text-align: right;">28913.77</div>

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Catherine T. Bye
 Signature _____ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
02 / 14 / 2013