RECEIVED 2011 MAR 28 AM 11: 26 FEC MAIL CENTER

FEC FORM 1

STATEMENT OF **ORGANIZATION**

				Office Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	4
Pacific Century Fin	nancial Corporati	on Special Politic	cal Education	on Committee
			1 1 1 1 1	
ADDRESS (number and street)	P.O. Box 2900			
(Check if address		1 1 1 1 1 1 1 1 1 1		
is changed)	Honolulu		LHI L	96846
		CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRE	ESS (Please provide only one	e-mail address)		
(Check if address	Robert Crowell	@boh.com		
(Check if address is changed)				
COMMITTEE'S WEB PAGE AD	DDRESS (URL)			
energy (Object 11 and the control of	n/a		11111	
(Check if address is changed)		1111111111	<u> </u>	
2. DATE 03 22	2 2011			
3. FEC IDENTIFICATION N		0025668		
4. IS THIS STATEMENT	NEW (N) OR	X AMENDED (A)		
I certify that I have examined to	this Statement and to the bes	st of my knowledge and belief	it is true, correct a	and complete.
Type or Print Name of Treasure	Robert Crowel	1		
Signature of Treasurer	alout fice	rmell	Date 03	22 2011
NOTE: Submission of false, error	•	n may subject the person signing		ne penalties of 2 U.S.C. §437g.
Office Use		For further information Federal Election Commis		FEC FORM 1

5.

	-	OMMITTEE e Cemmitiae:					
(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 Cand							
Cand Party	idale Affiliati	Office State on Sought: House Senate President District					
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name Candi							
Part	y Con	nmlttee:					
(d)		This committee is a (National, State (Democratic, Republican, etc.) Party.					
Polit	ical A	ction 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.					
(1)		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.)					
Join	t Fund	draising 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.						
	2.						
	3.						
	J.	in a contraction of the contract					
	4.	FEC ID number C					

EEC Form 1 /Dovinged	02/2000)	Page 3
FEC Form 1 (Revised Write or Type Committee Name		Page 3
	inancial Corporation Special Political Education Co	ommittee _
6. Name of Any Connected (Organization, Affiliated Committee, Joint Fundraising Representative, or Leadershi	p PAC Sponsor
Mailing Address		
		<u> </u>
	CITY STATE Z	IP CODE
Relationship: Connecte	d Organization Affiliated Committee Joint Fundraising Representative Lead	ership PAC Sponsor
 Custodian of Records: Ide books and records. 	ntify by name, address (phone number optional) and position of the person in possi	ession of committee
Full Name	 	
Mailing Address		
Title or Position	CITY STATE Z	IP CODE
<u> </u>	Telephone number	<u> </u>
Treasurer: List the name are any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the nam assistant treasurer).	e and address of
Full Name of Treasurer		
Mailing Address		
Title or Position	CITY STATE Z	IP CODE
	Telephone number	

FEC Form 1 (Revised 02/2009)			Page 4			
Full Name of Designated Agent	Stafford Kiguchi (Assistant Treasurer	-)				
Mailing Address	P.O. Box 2900					
		<u></u>				
	Honolulu CITY	HI STATE	2IP CODE			
Title or Position	n ge ¡Vice Prœsident; ; ; ; } Telephone	e number 8	08 ₁]-[694 ₁]-[8580 ;]			
 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. 						
Mailing Addres	s	1111.				
	CITY	STATE	ZIP CODE			
Name of Bank	, Depository, etc.					
Mailing Addres	s <u>[</u>					
		1 11				
	CITY	STATE	ZIP CODE			

Federal Election Commissio ENVELOPE REPLACEMENT PAGE FOR INCO The FEC added this page to the end of this filing to inc	MING DOCUMENTS
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C) 3 /23 / 11
USPS Priority Mail	Postmarked
Delivery Confirmation [™] or Signature (Confirmation [™] Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Bu	usiness 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):	e of Receipt or Postmarked
R	3/28/11
PREPARER (3/2005)	DATE PREPARED