

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines.

12FE4M5

Mark Takai for Congress

ADDRESS (number and street) ▼

PO Box 2267

Check if different than previously reported. (ACC)

Pearl City

HI

96782

2. **FEC IDENTIFICATION NUMBER** ▼

C C00548131

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

HI

01

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)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on / / in the State of

(c) 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.

Type or Print Name of Treasurer Edward Dion Kaimihana

Signature of Treasurer Edward Dion Kaimihana

[Electronically Filed]

Date

/ /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only								
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Mark Takai for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	34401.03	35661.03
(b) Total Contribution Refunds (from Line 20(d))	350.00	350.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	34051.03	35311.03
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	43430.02	64836.30
(b) Total Offsets to Operating Expenditures (from Line 14).....	2636.37	2636.37
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	40793.65	62199.93
8. Cash on Hand at Close of Reporting Period (from Line 27).....	57535.79	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	79478.40	

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 3 (Revised 12/2003)

Write or Type Committee Name

Mark Takai for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	10789.53	11039.53
(ii) Unitemized.....	611.50	1621.50
(iii) TOTAL of contributions from individuals ▶	11401.03	12661.03
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	23000.00	23000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	34401.03	35661.03
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	2636.37	2636.37
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	37037.40	38297.40

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	43430.02	64836.30
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	350.00	350.00
(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 20(a), (b), and (c)).....	350.00	350.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	43780.02	65186.30

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	64278.41
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	37037.40
25. SUBTOTAL (add Line 23 and Line 24).....	101315.81
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	43780.02
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	57535.79

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 38
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Mark Takai for Congress

A. Full Name (Last, First, Middle Initial)
Stanford Carr

Mailing Address 1100 Alakea St
FI 27

City Honolulu State HI Zip Code 96813-2833

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

Name of Employer: Stanford Carr Development, LLC
Occupation: Developer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 11 / 26 / 2014

Transaction ID : VN8VBD9CPJ9

Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Nicole Di Resta

Mailing Address 8801 Transue Dr

City Bethesda State MD Zip Code 20817-6930

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

Name of Employer: Cassidy & Associates
Occupation: Lobbyist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 12 / 09 / 2014

Transaction ID : VN8VBD9K9X4

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Denis Dwyer

Mailing Address 701 8th St NW

City Washington State DC Zip Code 20001-3854

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

Name of Employer: Williams and Jensen
Occupation: Principal

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 1529.56

Date of Receipt: 12 / 24 / 2014

Transaction ID : VN8VBDA0Z36

Amount of Each Receipt this Period: 1529.56

* In-Kind: Fundraiser Costs

SUBTOTAL of Receipts This Page (optional).....

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

3029.56

: 97 `A -G7 9 @C B9CI G`H9LH`F9 @ H98 `HC `5 `F9DCFH`G7 <98I @ `CF `H9A -N5 H-CB

Form/Schedule: SA11AI

Transaction ID : VN8VBDA0Z36

Avenue Events LLC - Event planning, catering, and staffing services

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 38
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Mark Takai for Congress

A. Full Name (Last, First, Middle Initial)
Elliot M Fiedler

Mailing Address 8811 2nd Ave

City State Zip Code
Silver Spring MD 20910-2724

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

Name of Employer Occupation
N/A Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 24 / 2014

Transaction ID : VN8VBDA0ZX1

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Jennice Fuentes

Mailing Address 3121 South St NW

City State Zip Code
Washington DC 20007-4419

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

Name of Employer Occupation
Fuentes Strategies, LLC Managing Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 24 / 2014

Transaction ID : VN8VBDA0ZM0

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Gregg K Furuya

Mailing Address 94-1007 Nawele St

City State Zip Code
Waipahu HI 96797-4918

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

Name of Employer Occupation
Deloitte & Touche Hawaii CPA

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 26 / 2014

Transaction ID : VN8VBD9CPM5

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional).....

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 38
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Mark Takai for Congress

A. Full Name (Last, First, Middle Initial)
Irene Hirano

Mailing Address 5809 Nicholson Ln
Apt 1414

City Rockville State MD Zip Code 20852-5707

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

Name of Employer U.S.-Japan Council Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 24 / 2014

Transaction ID : VN8VBDA0ZT7

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Patricia M Loui

Mailing Address 1077 30th St NW
305

City Washington State DC Zip Code 20007-3823

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

Name of Employer Export Import Bank of the United State Occupation Member, Board of Directors

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 09 / 2014

Transaction ID : VN8VBD9K7Z7

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Carole Kai Onouye

Mailing Address 1336 Alewa Dr

City Honolulu State HI Zip Code 96817-1201

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

Name of Employer Self Occupation Television production

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 27 / 2014

Transaction ID : VN8VBD9D0E8

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 38
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Mark Takai for Congress

Full Name (Last, First, Middle Initial) Lawrence P. Peduzzi		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 25 / 2014	
Mailing Address 221 S Alfred St		Transaction ID : VN8VBDAQDK5	
City Alexandria	State VA	Zip Code 22314-3647	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2359.97	
Name of Employer Peduzzi and Assoc.	Occupation President		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2359.97		
		* In-Kind: Catering	

Full Name (Last, First, Middle Initial) Vincent A Roberti Sr		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2014	
Mailing Address PO Box 447 PO Box 447		Transaction ID : VN8VBD9CPF5	
City Kent	State CT	Zip Code 06757-0447	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer Navigators Global	Occupation Principal		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y Y Y	
Mailing Address			
City	State	Zip Code	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

SUBTOTAL of Receipts This Page (optional).....	4959.97
TOTAL This Period (last page this line number only).....	10789.53

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 38
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Mark Takai for Congress

A. Full Name (Last, First, Middle Initial)
COALITION OF AIRLINE PILOTS ASSOCIATIONS PAC

Mailing Address 1101 Pennsylvania Ave NW
Ste 6646

City Washington State DC Zip Code 20004-2514

FEC ID number of contributing federal political committee. **C C00379263**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2014

Transaction ID : VN8VBDA0ZD5

Amount of Each Receipt this Period
2500.00

2014 General Debt

B. Full Name (Last, First, Middle Initial)
COMCAST CORPORATION POLITICAL ACTION COMMITTEE- FEDERAL

Mailing Address 1701 John F Kennedy Blvd
Fl 49

City Philadelphia State PA Zip Code 19103-2855

FEC ID number of contributing federal political committee. **C C00248716**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2014

Transaction ID : VN8VBDA0ZA1

Amount of Each Receipt this Period
2500.00

2014 General Debt

C. Full Name (Last, First, Middle Initial)
COMMUNICATION WORKERS OF AMERICA

Mailing Address 501 3rd St NW

City Washington State DC Zip Code 20001-2760

FEC ID number of contributing federal political committee. **C C00002089**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2014

Transaction ID : VN8VBDA0ZN8

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional).....

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

7500.00

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

Form/Schedule: SA11C

Transaction ID : VN8VBDA0ZD5

2014 General Debt Repayment

Form/Schedule: SA11C

Transaction ID: VN8VBDA0ZA1

2014 General Debt Repayment

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

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

FOR LINE NUMBER: PAGE 13 OF 38
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mark Takai for Congress

A. Full Name (Last, First, Middle Initial)
FOLEY & LARDNER POLITICAL FUND, INC.

Mailing Address 3000 K St NW

City State Zip Code
Washington DC 20007-5124

FEC ID number of contributing federal political committee. **C C00105338**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
12 / 24 / 2014

Transaction ID : VN8VBDA0ZJ4

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
FRIENDS OF MAZIE HIRONO

Mailing Address PO Box 677

City State Zip Code
Honolulu HI 96809-0677

FEC ID number of contributing federal political committee. **C C00420760**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
11 / 26 / 2014

Transaction ID : VN8VBD9CPH1

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
K&L GATES LLP POLITICAL ACTION COMMITTEE (DC)

Mailing Address 1601 K St NW

City State Zip Code
Washington DC 20006-1682

FEC ID number of contributing federal political committee. **C C00213173**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
12 / 24 / 2014

Transaction ID : VN8VBDA0Z93

Amount of Each Receipt this Period
500.00

2014 General Debt

SUBTOTAL of Receipts This Page (optional).....

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

2500.00

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

Form/Schedule: SA11C

Transaction ID : VN8VBDA0Z93

2014 General Debt Repayment

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 38
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Mark Takai for Congress

A. Full Name (Last, First, Middle Initial)
MONSANTO COMPANY CITIZENSHIP FUND AKA MONSANTO CITIZENSHIP FUND

Mailing Address 800 N Lindbergh Blvd

City Saint Louis State MO Zip Code 63167-1000

FEC ID number of contributing federal political committee. **C C00042069**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2014

Transaction ID : VN8VBDA0Z69

Amount of Each Receipt this Period
500.00

2014 General Debt

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE

Mailing Address 430 N Michigan Ave

City Chicago State IL Zip Code 60611-4011

FEC ID number of contributing federal political committee. **C C00030718**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2014

Transaction ID : VN8VBDA0ZF0

Amount of Each Receipt this Period
2500.00

2014 General Debt

C. Full Name (Last, First, Middle Initial)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1101 King St Ste 600

City Alexandria State VA Zip Code 22314-2965

FEC ID number of contributing federal political committee. **C C00144766**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2014

Transaction ID : VN8VBDA0ZB9

Amount of Each Receipt this Period
2500.00

2014 General Debt

SUBTOTAL of Receipts This Page (optional).....

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

5500.00

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

Form/Schedule: SA11C

Transaction ID : VN8VBDA0Z69

2014 General Debt Repayment

Form/Schedule: SA11C

Transaction ID: VN8VBDA0ZF0

2014 General Debt Repayment

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

Form/Schedule: SA11C

Transaction ID : VN8VBDA0ZB9

2014 General Debt Repayment

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 18 OF 38
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Mark Takai for Congress

Full Name (Last, First, Middle Initial)
OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION (OPEIU) JB MOSS VOICE OF THE ELECTOR

A. Mailing Address 265 W 14th St
Ste 610
City New York State NY Zip Code 10011-7179

FEC ID number of contributing federal political committee. **C** C00007898

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date 1000.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 24 / 2014

Transaction ID : VN8VBDA0ZE3

Amount of Each Receipt this Period
1000.00

2014 General Debt

B. Full Name (Last, First, Middle Initial)
PARSONS BRINCKERHOFF GROUP INC. PAC

Mailing Address 1401 K St NW
Ste 701
City Washington State DC Zip Code 20005-3430

FEC ID number of contributing federal political committee. **C** C00287003

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
Election Cycle-to-Date 1000.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 24 / 2014

Transaction ID : VN8VBDA0ZK2

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
THE DOW AGROSCIENCES LLC EMPLOYEE POLITICAL ACTION COMMITTEE (AGPAC)

Mailing Address 9330 Zionsville Rd
City Indianapolis State IN Zip Code 46268-1053

FEC ID number of contributing federal political committee. **C** C00247981

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
Election Cycle-to-Date 500.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 24 / 2014

Transaction ID : VN8VBDA0ZS9

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

2500.00

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

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

Form/Schedule: SA11C

Transaction ID : VN8VBDA0ZE3

2014 General Debt Repayment

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 38
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Mark Takai for Congress

A. Full Name (Last, First, Middle Initial)
TIME WARNER CABLE INC. FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 901 F St NW
Ste 800

City Washington State DC Zip Code 20004-1477

FEC ID number of contributing federal political committee. **C** C00431551

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 26 / 2014

Transaction ID : VN8VBD9CPV0

Amount of Each Receipt this Period
2000.00

2014 General Debt

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

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

2000.00

23000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 38
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Mark Takai for Congress

A. Full Name (Last, First, Middle Initial)
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 S Capitol St SE
FI 2

City Washington State DC Zip Code 20003-4024

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
361.37

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2014

Transaction ID : VN8VBDA0Z44

Amount of Each Receipt this Period
361.37

Refund

B. Full Name (Last, First, Middle Initial)
Ruby Hong-Shaw

Mailing Address 1005 8th Ave

City Honolulu State HI Zip Code 96816-2450

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

Name of Employer Occupation

Information Requested Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2014

Transaction ID : VN8VBDA0Z10

Amount of Each Receipt this Period
2275.00

Refund Check for Rent Deposit

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

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

2636.37

2636.37

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA14

Transaction ID : VN8VBDA0Z44

Unused money for POTUS call

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 38			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Mark Takai for Congress

Full Name (Last, First, Middle Initial) A. Abercrombie for Governor		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2014
Mailing Address 1357 Kapiolani Blvd		Amount of Each Disbursement this Period 533.98 Transaction ID : VN7W39TN0G0
City Honolulu State HI Zip Code 96814-4549	Purpose of Disbursement Rental - office space Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Rental - office space

Full Name (Last, First, Middle Initial) B. Anthology		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2014
Mailing Address 1003 Bishop St FI 9		Amount of Each Disbursement this Period 916.23 Transaction ID : VN7W39TMHR0
City Honolulu State HI Zip Code 96813-6400	Purpose of Disbursement Printing for Fundraiser Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Bankcard Merchant Fees		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2014
Mailing Address 1399 E State St		Amount of Each Disbursement this Period 491.81 Transaction ID : VN7W39JMK9
City Geneva State IL Zip Code 60134-2491	Purpose of Disbursement Credit Card Processing Fee Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1942.02
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Mark Takai for Congress

Full Name (Last, First, Middle Initial) A. CFO Compliance Group		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2014
Mailing Address 1 Park Row Ste 5		Amount of Each Disbursement this Period 1000.00
City Providence	State RI Zip Code 02903-1235	
Purpose of Disbursement Compliance Consulting	Category/Type 001	Transaction ID : VN7W39TN0F2
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Compliance Consulting
State: District:		

Full Name (Last, First, Middle Initial) B. Brian E Cordova		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2014
Mailing Address 258 Philadelphia Ave		Amount of Each Disbursement this Period 1741.16
City Chambersburg	State PA Zip Code 17201-1652	
Purpose of Disbursement Payroll	Category/Type 001	Transaction ID : VN7W39TJKC6
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Brian E Cordova		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2014
Mailing Address 258 Philadelphia Ave		Amount of Each Disbursement this Period 1741.16
City Chambersburg	State PA Zip Code 17201-1652	
Purpose of Disbursement Salary	Category/Type 001	Transaction ID : VN7W39TN164
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4482.32
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 38			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Mark Takai for Congress

Full Name (Last, First, Middle Initial) A. Brian E Cordova		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2014
Mailing Address 258 Philadelphia Ave		Amount of Each Disbursement this Period 1741.16 Transaction ID : VN7W39TNYC1
City Chambersburg	State PA	
Zip Code 17201-1652	Purpose of Disbursement Payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Denis Dwyer		Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2014
Mailing Address 701 8th St NW		Amount of Each Disbursement this Period 1529.56 Transaction ID : VN8VBDA0Z361
City Washington	State DC	
Zip Code 20001-3854	Purpose of Disbursement Fundraiser Costs	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	* In-Kind Received

Full Name (Last, First, Middle Initial) c. Alexander Hetherington		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2014
Mailing Address 1104 Kealaolu Ave		Amount of Each Disbursement this Period 500.68 Transaction ID : VN7W39TJKD3
City Honolulu	State HI	
Zip Code 96816-5419	Purpose of Disbursement Payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3771.40
TOTAL This Period (last page this line number only).....	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Mark Takai for Congress

Full Name (Last, First, Middle Initial) A. Kaiser Permanente		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2014
Mailing Address 711 Kapiolani Blvd FI 4		Amount of Each Disbursement this Period 233.61 Transaction ID : VN7W39TMH44
City Honolulu State HI Zip Code 96813-5237	Purpose of Disbursement Health Insurance 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Darian Kwon		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2014
Mailing Address 3030 Ala Ilima St 1108		Amount of Each Disbursement this Period 321.19 Transaction ID : VN7W39TJKE1
City Honolulu State HI Zip Code 96818-2782	Purpose of Disbursement Payroll 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Darian Kwon		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2014
Mailing Address 3030 Ala Ilima St 1108		Amount of Each Disbursement this Period 168.45 Transaction ID : VN7W39TN171
City Honolulu State HI Zip Code 96818-2782	Purpose of Disbursement Salary 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	723.25
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Mark Takai for Congress

Full Name (Last, First, Middle Initial) A. Darian Kwon		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2014
Mailing Address 3030 Ala Ilima St 1108		Amount of Each Disbursement this Period 168.45 Transaction ID : VN7W39TNYD9
City Honolulu	State HI Zip Code 96818-2782	
Purpose of Disbursement Payroll	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Carissa K Nakamura		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2014
Mailing Address 98-1850 Kaahumanu St Apt G		Amount of Each Disbursement this Period 483.16 Transaction ID : VN7W39TJKF9
City Pearl City	State HI Zip Code 96782-3812	
Purpose of Disbursement Payroll	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. NGP VAN, Inc.		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2014
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 300.00 Transaction ID : VN7W39TMH36
City Washington	State DC Zip Code 20005-5006	
Purpose of Disbursement Database	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	951.61
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Mark Takai for Congress

Full Name (Last, First, Middle Initial) A. NGP VAN, Inc.		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2014
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 600.00 Transaction ID : VN7W39TR964
City Washington State DC Zip Code 20005-5006	Purpose of Disbursement Database	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Normington, Petts and Associates		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2014
Mailing Address 1050 17th St NW Ste 444		Amount of Each Disbursement this Period 11000.00 Transaction ID : VN7W39TN0H8
City Washington State DC Zip Code 20036-5518	Purpose of Disbursement Polling & Campaign Strategy	
Candidate Name	Category/Type 005	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Oceanic Time Warner Cable		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2014
Mailing Address 200 Akamainui St		Amount of Each Disbursement this Period 284.33 Transaction ID : VN7W39TM574
City Mililani State HI Zip Code 96789-3912	Purpose of Disbursement Internet/Cable Service	
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	11884.33
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 38			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Mark Takai for Congress

Full Name (Last, First, Middle Initial) A. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2014
Mailing Address 340 Kamakee St		Amount of Each Disbursement this Period 2310.44 Transaction ID : VN7W39TN7F7
City Honolulu	State HI Zip Code 96814-5200	
Purpose of Disbursement Office Equipment	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Robert Olker		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2014
Mailing Address 1310 K St SE Apt 203		Amount of Each Disbursement this Period 1288.36 Transaction ID : VN7W39TJKS8
City Washington	State DC Zip Code 20003-4441	
Purpose of Disbursement Payroll	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Robert Olker		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2014
Mailing Address 1310 K St SE Apt 203		Amount of Each Disbursement this Period 1288.37 Transaction ID : VN7W39TN189
City Washington	State DC Zip Code 20003-4441	
Purpose of Disbursement Salary	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4887.17
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 38			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Mark Takai for Congress

Full Name (Last, First, Middle Initial) A. Robert Olker			Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2014
Mailing Address 1310 K St SE Apt 203			Amount of Each Disbursement this Period 1288.36 Transaction ID : VN7W39TNYE7
City Washington	State DC	Zip Code 20003-4441	
Purpose of Disbursement Payroll		Category/ Type 001	
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) B. Paychex Payroll Services			Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2014
Mailing Address 911 Panorama Trl S			Amount of Each Disbursement this Period 99.94 Transaction ID : VN7W39TJKH5
City Rochester	State NY	Zip Code 14625-2311	
Purpose of Disbursement Payroll Processing Fee		Category/ Type 001	
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) c. Paychex Payroll Services			Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2014
Mailing Address 911 Panorama Trl S			Amount of Each Disbursement this Period 2225.10 Transaction ID : VN7W39TJKJ3
City Rochester	State NY	Zip Code 14625-2311	
Purpose of Disbursement Payroll Taxes		Category/ Type 001	
Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	3613.40
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Mark Takai for Congress

Full Name (Last, First, Middle Initial) A. Paychex Payroll Services		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2014
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 95.00 Transaction ID : VN7W39TMVV5
City Rochester State NY Zip Code 14625-2311	Purpose of Disbursement Payroll Processing Fee Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Paychex Payroll Services		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2014
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 1640.22 Transaction ID : VN7W39TMVW3
City Rochester State NY Zip Code 14625-2311	Purpose of Disbursement Payroll Taxes Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Paychex Payroll Services		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2014
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 95.00 Transaction ID : VN7W39TR948
City Rochester State NY Zip Code 14625-2311	Purpose of Disbursement Payroll Service Fee Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1830.22
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Mark Takai for Congress

A. Paychex Payroll Services

Full Name (Last, First, Middle Initial)
Mailing Address 911 Panorama Trl S

City Rochester State NY Zip Code 14625-2311

Purpose of Disbursement Payroll Tax

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 31 / 2014

Amount of Each Disbursement this Period: 1640.23

Transaction ID : VN7W39TR956

B. Lawrence P. Peduzzi

Full Name (Last, First, Middle Initial)
Mailing Address 221 S Alfred St

City Alexandria State VA Zip Code 22314-3647

Purpose of Disbursement Catering

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 25 / 2014

Amount of Each Disbursement this Period: 2359.97

Transaction ID : VN8VBDAQDK5I

* In-Kind Received

c. Sam's Club

Full Name (Last, First, Middle Initial)
Mailing Address 1000 Kamehameha Hwy

City Pearl City State HI Zip Code 96782-2881

Purpose of Disbursement Fundraising Event Expense

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 26 / 2014

Amount of Each Disbursement this Period: 26.13

Transaction ID : VN7W39TN7H3

SUBTOTAL of Disbursements This Page (optional) 4026.33

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Mark Takai for Congress

Full Name (Last, First, Middle Initial) A. Sam's Club		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2014
Mailing Address 1000 Kamehameha Hwy		Amount of Each Disbursement this Period 961.40 Transaction ID : VN7W39TN7J1
City Pearl City	State HI Zip Code 96782-2881	
Purpose of Disbursement Fundraising Event Expense	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Sam's Club		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2014
Mailing Address 1000 Kamehameha Hwy		Amount of Each Disbursement this Period 72.11 Transaction ID : VN7W39TN7K9
City Pearl City	State HI Zip Code 96782-2881	
Purpose of Disbursement Fundraising Event Expense	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Service Printers Hawaii Inc.		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2014
Mailing Address 1829 Dillingham Blvd		Amount of Each Disbursement this Period 267.51 Transaction ID : VN7W39TR972
City Honolulu	State HI Zip Code 96819-4020	
Purpose of Disbursement Printing	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1301.02
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 38			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Mark Takai for Congress

Full Name (Last, First, Middle Initial) A. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2014
Mailing Address PO Box 66100		Amount of Each Disbursement this Period 1211.60
City Chicago	State IL Zip Code 60666-0100	
Purpose of Disbursement Airfare	Category/Type 002	Transaction ID : VN7W39TJKB8
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Vesta Virgin Mobile		Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2014
Mailing Address 5122 NE M L King Blvd		Amount of Each Disbursement this Period 52.35
City Portland	State OR Zip Code 97211-3234	
Purpose of Disbursement Mobile Phones	Category/Type 001	Transaction ID : VN7W39TJKG7
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Vesta Virgin Mobile		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2014
Mailing Address 5122 NE M L King Blvd		Amount of Each Disbursement this Period 41.88
City Portland	State OR Zip Code 97211-3234	
Purpose of Disbursement Mobile Phones	Category/Type 001	Transaction ID : VN7W39TMH28
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1305.83
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 38	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Mark Takai for Congress

Full Name (Last, First, Middle Initial) A. Vesta Virgin Mobile		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2014
Mailing Address 5122 NE M L King Blvd		Amount of Each Disbursement this Period 52.34
City Portland	State OR	
Zip Code 97211-3234	Purpose of Disbursement Mobile Phones	Transaction ID : VN7W39TN7G5
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Waialae Country Club		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2014
Mailing Address 4997 Kahala Ave		Amount of Each Disbursement this Period 2439.99
City Honolulu	State HI	
Zip Code 96816-5471	Purpose of Disbursement Fundraising Event	Transaction ID : VN7W39TMHS8
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
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:		

SUBTOTAL of Disbursements This Page (optional).....	2492.33
TOTAL This Period (last page this line number only).....	43211.23

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Mark Takai for Congress

Transaction ID : VN8VBD78HN5L

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

Kyle Mark Takai

Primary

General

Other (specify) ▼

Mailing Address
98-524 Kiliohu Loop

City State ZIP Code
Aiea HI 96701-2150

Original Amount of Loan 50000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 50000.00
-------------------------------------	------------------------------------	---

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
10 / 29 / 2014

M M / D D / Y Y Y Y
none

none % (apr)

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
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
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	50000.00
TOTALS This Period (last page in this line only).....	▶	50000.00

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

Mark Takai for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Crossroads Consulting Inc.

Mailing Address PO Box 66811

City State Zip Code
 Washington DC 20035-6811

Nature of Debt (Purpose):
 Field Services

Outstanding Balance Beginning This Period **Transaction ID : VN5XK9H9VP3**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Crossroads Consulting Inc.

Mailing Address PO Box 66811

City State Zip Code
 Washington DC 20035-6811

Nature of Debt (Purpose):
 Travel

Outstanding Balance Beginning This Period **Transaction ID : VN5XK9H9VS6**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Fiorello Consulting

Mailing Address 3914 Barcroft Mews Ct

City State Zip Code
 Falls Church VA 22041-1218

Nature of Debt (Purpose):
 Fundraising Consulting Services

Outstanding Balance Beginning This Period **Transaction ID : VN5XK9H9VR9**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="15930.20"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 38 OF 38
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Mark Takai for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Fiorello Consulting	Nature of Debt (Purpose): Catering
Mailing Address 3914 Barcroft Mews Ct	
City State Zip Code Falls Church VA 22041-1218	

Outstanding Balance Beginning This Period 0.00	Transaction ID : VN5XK9H9VT4	
Amount Incurred This Period 577.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 577.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Fiorello Consulting	Nature of Debt (Purpose): Fundraising Consulting Services
Mailing Address 3914 Barcroft Mews Ct	
City State Zip Code Falls Church VA 22041-1218	

Outstanding Balance Beginning This Period 0.00	Transaction ID : VN5XK9H9VV2	
Amount Incurred This Period 2500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ho?akea Communications	Nature of Debt (Purpose): Communications Consulting Services
Mailing Address 500 Ala Moana Blvd Ste 7400	
City State Zip Code Honolulu HI 96813-4902	

Outstanding Balance Beginning This Period 0.00	Transaction ID : VN5XK9H9VW0	
Amount Incurred This Period 10471.20	Payment This Period 0.00	Outstanding Balance at Close of This Period 10471.20

1) SUBTOTALS This Period This Page (optional)	13548.20
2) TOTALS This Period (last page this line number only)	29478.40
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	50000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	79478.40