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Image# 201604119012289524

FEC FORM 3Y

REPORT OF RECEIPTS AND DISBURSEMENTS

TORIN 3X	For Other Than A	n Authorized	l Committe	ee		Office Use Only	
1. NAME OF	TYPE OR PRINT ▼	Exa	mple: If typin	ig, type	12FE4M5	Since ode Only	
COMMITTEE (in full)		ove	r the lines.		12FE4M5		
State of Hawaii O	rganization of Police	Officers (S	SHOPO P	olitical Ac	tion Fund)	
ADDRESS (number and st	reet) 1717 Hoe Street						
Check if differer	nt Line						
than previously reported. (ACC)	Honolulu				HI	96819	
2. FEC IDENTIFICATI	ON NUMBER ▼	CITY ▲		S	STATE 🛦	ZIP CO	DE 🛦
C C00510974		3. IS THIS REPORT	~	IEW N) OR	AM (A)	ENDED	
4. TYPE OF REPOR	RT (b) Monthly Report	Feb 20 (M2)		May 20 (M5)	Aug	20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports	Due On:	Mar 20 (M3)	J	lun 20 (M6)	Sep	20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15		Apr 20 (M4)	J	lul 20 (M7)	Oct 2	20 (M10)	Jan 31 (YE)
Quarterly Re	eport (Q1) (c) 12-Day		Primary (12P)	General ((12G)	Runoff (12R)
July 15 Quarterly Re	eport (Q2) PRE-Elect Report for		Convention (12C)	Special (12S)	
October 15 Quarterly Re	eport (Q3)						
January 31 Year-End Re	eport (YE)	Election on	M M /	D D /		in the State o	f
July 31 Mid- Report (Non Year Only) (-election (d) 30-Day		General (30G	i)	Runoff (3	0R)	Special (30S)
Termination (TER)	Report	Election on	M = M /	D D /	Y = Y = Y = Y	in the State o	f
5. Covering Period	M M / D D / Y 01	2016	through	03	31_	2016	
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 Mr. James M Smith							
Signature of Treasurer	Mr. James M Smith		[Electronically	Filed] Da	ate 04	/ 11 /	2016
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						FEC FOR	M 3X
Use Only						Rev. 12/2	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)
Page 2

Write or Type Committee Name

State of Hawaii Organization of Police Officers (SHOPO Political Action Fund)

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
3. (a	a) Cash on Hand January 1, 2016		209033.86
(1	b) Cash on Hand at Beginning of Reporting Period	209033.86	
(c) Total Receipts (from Line 19)	5044.37	5044.37
((d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	214078.23	214078.23
7. T	otal Disbursements (from Line 31)	4550.00	4550.00
F	Cash on Hand at Close of Reporting Period subtract Line 7 from Line 6(d))	209528.23	209528.23
tl	Debts and Obligations Owed TO ne Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
tl	Debts and Obligations Owed BY The Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

State of Hawaii Organization of Police Officers (SHOPO Political Action Fund)

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees (i) Itemized (use Schedule A)	0.00	0.00
(i) iterrized (use Scriedule A)	7 7	
(ii) Unitemized	4324.75	4324.75
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	4324.75	4324.75
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	4324.75	4324.75
Totals to Line 33, page 5) Transfers From Affiliated/Other	1021.10	102 1.70
Party Committees	0.00	0.00
rarty Committees	0.00	3.00
. All Loans Received	0.00	0.00
. Loan Repayments Received	0.00	0.00
. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)	0.00	
(Carry Totals to Line 37, page 5)	0.00	0.00
Refunds of Contributions Made		
to Federal Candidates and Other Political Committees	0.00	0.00
Other Federal Receipts	0.00	0.00
(Dividends, Interest, etc.)	719.62	719.62
Transfers from Non-Federal and Levin Funds	713.02	7 1002
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	5044.37	5044.37
. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	5044.37	5044.37

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
	perating Expenditures: a) Allocated Federal/Non-Federal Activity (from Schedule H4)	53 55	3
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
(b	b) Other Federal Operating		
,	Expenditures	4550.00	4550.00
(0	c) Total Operating Expenditures	4550.00	4550.00
22 T	(add 21(a)(i), (a)(ii), and (b))▶ ransfers to Affiliated/Other Party	4550.00	4550.00
	ommittees	0.00	0.00
F	ontributions to ederal Candidates/Committees	200	0.00
aı	nd Other Political Committees	0.00	0.00
	ndependent Expenditures use Schedule E)	0.00	0.00
25. C	oordinated Party Expenditures 2 U.S.C. §441a(d))	7 7 7	
(ί	use Schedule F)	0.00	0.00
P6 14	oan Repayments Made	0.00	0.00
.o. L	our riopaymonio Mado		
27. L	oans Madeefunds To:	0.00	0.00
	a) Individuals/Persons Other	0.00	0.00
	Than Political Committees	0.00	0.00
(b	o) Political Party Committees	0.00	0.00
(0	•	0.00	0.00
	(such as PACs)	0.00	0.00
(c	d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶	0.00	0.00
	Mh - u Dishaan saasaa	0.00	0.00
29. O	ther Disbursements	0.00	0.00
30. F	ederal Election Activity (2 U.S.C. §431(20))		
(a	a) Allocated Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	(i) I ederal Share		
	(ii) "Levin" Share	0.00	0.00
(b	b) Federal Election Activity Paid Entirely	0.00	0.00
(c	With Federal Funds c) Total Federal Election Activity (add	0.00	0.00
, ,	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
	otal Disbursements (add Lines 21(c), 22, 3, 24, 25, 26, 27, 28(d), 29 and 30(c))	4550.00	4550.00
۷.	o, 24, 20, 20, 21, 20(a), 28 and 00(b))	4550.00	4550.00
32. To	otal Federal Disbursements		
	subtract Line 21(a)(ii) and Line 30(a)(ii)	4550.00	
fr	om Line 31)	4550.00	4550.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	4324.75	4324.75
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4324.75	4324.75
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	4550.00	4550.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	4550.00	4550.00

S 17

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 6 OF 7
ITEMIZED RECEIPTS			for each category of the	(check only one)
			Detailed Summary Page	11a 11b 11c 12
Ar	ny information copied from such Reports and St for commercial purposes, other than using the	atements mand a	Lay not be sold or used by any penders of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	State of Hawaii Organization of	Police O	fficers (SHOPO Politic	al Action Fund)
Α.	Full Name (Last, First, Middle Initial) Payden & Rygel			Date of Receipt
	Mailing Address 333 s. Grand Avenue			01 04 2016
	City	State	Zip Code	Transaction ID : SA17.4600
	Los Angeles	CA	90071-1504	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		713.17
	Name of Employer	Occupation	I	Dividends earned on Investment
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	00 0		
	Other (specify) ▼		713.17	
_	Full Name (Last First Middle Initial)			
В.	Full Name (Last, First, Middle Initial)	Date of Receipt		
В.	Mailing Address			<u> </u>
	Walling Address			M = M / D = D / Y = Y = Y
	City	State	Zip Code	
				Amount of Each Receipt this Period
	FEC ID number of contributing	С		
	federal political committee.	U .		
	Name of Employer	Occupation	<u> </u>	Memo Item
	. ,	,		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	/ iggi ogalo	Tour to Bato V	
	Other (specify) ▼		<i>^ ^ ^</i>	
c.	Full Name (Last, First, Middle Initial)			Date of Receipt
	Mailing Address			M = M / D = D / Y = Y = Y
	City	State	Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing	С		
	federal political committee.	U .		
	Name of Employer	Occupation	1	Memo Item
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	33 3		
	Other (specify) ▼			
s	SUBTOTAL of Receipts This Page (optional)			713.17

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

713.17

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	NUMBER: PAGE 7 OF 7	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 24 25 26 28a 28b 28c 29 30
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full) State of Hawaii Organization of Pol			
Full Name (Last, First, Middle Initial) - Hawaii State Tax Collector	Date of Disbursement		
Mailing Address P.O. Box 1425			03 16 2016
•	State Zip Code		Transaction ID : SB21B.4603
Honolulu Purpose of Disbursement	HI 96806		Transaction ID: 3B21B.4603
Estimated tax payment			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	400.00
	nent For: Primary General Other (specify)	Туре	Memo Item
State: District:			
Full Name (Last, First, Middle Initial) 3- IRS			Date of Disbursement
Mailing Address Ogden			03 22 2016
Ogden	State Zip Code UT 84201		Transaction ID : SB21B.4602
Purpose of Disbursement Estimated Fed tax return payment YE 123115			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	4000.00
	nent For: Primary General Other (specify)		Memo Item
State: District:			
Full Name (Last, First, Middle Initial)			Date of Disbursement
Mailing Address			
City	State Zip Code		
Purpose of Disbursement			
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
	nent For: Primary General Other (specify)	Nr.	Memo Item
SUBTOTAL of Disbursements This Page (optional)			4400.00
TOTAL This Period (last page this line number only).			4400.00