FFC I	REPORT AND DIS For An Au	-	MENTS	Offic	e Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT		Example: If typing, type over the lines.	12FE4M5	
Kiaaina for Congress					
ADDRESS (number and street)	PO Box 700568				
Check if different than previously					
reported. (ACC)	Kapolei			HI 96709	9
2. FEC IDENTIFICATION N	UMBER 🔻			STATE	ZIP CODE
C C00500470		3. IS THIS REPORT	× NEW (N) OR	AMENDED (A)	STATE ▼ DISTRICT
<ul> <li>(a) Quarterly Reports:</li> <li>April 15 Quarterly</li> <li>July 15 Quarterly</li> <li>October 15 Quarter</li> <li>X January 31 Year-E</li> <li>Termination Report</li> </ul>	Report (Q2) erly Report (Q3) nd Report (YE)	Election c	OST-Election Report for General (30G)	General (12G) Special (12S)	<ul> <li>Runoff (12R)</li> <li>in the State of</li> <li>Special (30S)</li> <li>in the State of</li> </ul>
5. Covering Period		Y Y Y Y 2012	through	M / D D / Y 12 31 /	Y Y Y 2012
I certify that I have examined t Type or Print Name of Treasure		the best of my	knowledge and belief it	is true, correct and cor	nplete.
Signature of Treasurer Yuk	lin Aluli		[Electronically Filed]	Date	D D / Y Y Y Y 29 / 2013
NOTE: Submission of false, error	neous, or incomplet	e information ma	y subject the person sign	ing this Report to the pe	enalties of 2 U.S.C. §437g.
FE5AN018					Revised 02/2003)

01/29/2013 18 : 00

PAGE 1 / 14

Ima	age# 13960530545		
	FEC Form 3 (Revised 02/2003)	SUMMARY PAGE of Receipts and Disbursements	PAGE 2 / 14
	Vrite or Type Committee Name Kiaaina for Congress		
R	Report Covering the Period: From:	10 / D D / Y Y Y Y 10 01 / 2012 To	$\frac{M}{12} \frac{D}{31} \frac{D}{2012} \frac{1}{2}$
		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))	0.00	129739.74
	(b) Total Contribution Refunds (from Line 20(d))	0.00	750.00
	(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	128989.74
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	568.67	145621.41
	(b) Total Offsets to Operating Expenditures (from Line 14)	259.57	523.56
	<ul><li>(c) Net Operating Expenditures</li><li>(subtract Line 7(b) from Line 7(a))</li></ul>	309.10	145097.85
8.	Cash on Hand at Close of Reporting Period (from Line 27)	1513.75	
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D)	22000.00	

## For further information contact:

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

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

FEC Form 3 (Revised 07/05)

### POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

0.00

0.00

0.00

0.00

0.00

• If the candidate participated in the general election, use this form for the 30-day Post-General report.

• If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

#### Write or Type Committee Name Kiaaina for Congress 2012 12 31 2012 Report Covering the Period: From: 10 01 To: I. RECEIPTS COLUMN A COLUMN B COLUMN C **Total this Period** Election Cycle Total as of **Total for** M 11 06 2012 11 07 2012 (date of general election) (date after general election) through 11. CONTRIBUTIONS (other than loans) FROM: M (a) Individuals/Persons Other than 12 31 2012 **Political Committees** (last day of reporting period) Itemized (use Schedule A) (i) 0.00 75991.29 1 (ii) Unitemized 0.00 29674.00 (iii) Total of contributions from individuals 0.00 105465.29 (b) Political Party Committees 0.00 0.00 (c) Other Political Committees 0.00 1500.00

# POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)		•	PAGE 4 / 14
	COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
	(d) The Candidate		
	0.00	22774.45	0.00
	(e) TOTAL CONTRIBUTIONS (other than loa	ns) (add Lines 11(a)(iii), (b), (c) and (d))	
	0.00	129739.74	0.00
12.	TRANSFERS FROM OTHER AUTHORIZED (	COMMITTEES	
	0.00	0.00	0.00
13.	LOANS: (a) Made or Guaranteed by the Candidate		
	0.00	18000.00	0.00
	(b) All Other Loans		
	0.00	0.00	0.00
	(c) TOTAL LOANS (add Lines 13(a) and (b))		
	0.00	18000.00	0.00
14.	OFFSETS TO OPERATING EXPENDITURES	(Refunds, rebates, etc.)	
	259.57	523.56	259.57
15.	OTHER RECEIPTS (Dividends, Interest, etc.)		
	0.00	0.00	0.00
16.	TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 a	and 15)	
	259.57	148263.30	259.57

Image#	13960530548		
		CTION DETAILED SUMMARY	PAGE
•	Re FEC Form 3 (Revised 1/01)	port of Receipts and Disbursements	PAGE 5 / 14
Write	or Type Committee Name		
Kiaa	aina for Congress		
Repo	rt Covering the Period: From:	0 / D D / Y Y Y Y 2012	To: 12 31 2012
	. DISBURSEMENTS		
	COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OF	PERATING EXPENDITURES		
	568.67	145621.41	367.74
18. TR	ANSFERS TO OTHER AUTHORIZED CO	MMITTEES	
	0.00	0.00	0.00
	AN REPAYMENTS: Of Loans Made or Guaranteed by the C	andidate	
	0.00	0.00	0.00
(b)	Of All Other Loans		
	0.00	0.00	0.00
(c)	TOTAL LOAN REPAYMENTS (add Line:	s 19(a) and 19(b))	
	0.00	0.00	0.00
	FUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other Than Political	Committees	
	0.00	750.00	0.00
(b)	Political Party Committees		
- F	0.00	0.00	0.00

I		port of Receipts and Disbursements	PAGE 6 / 14
	COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
	(c) Other Political Committees (such as PAC	Cs)	
	0.00	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add	d Lines 20(a), (b) and (c))	
	0.00	750.00	0.00
21.	OTHER DISBURSEMENTS		
	0.00	500.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18	3, 19(c), 20(d) and 21)	
	568.67	146871.41	367.74
	III. NET CONTRIBUTIONS (OTHER	THAN LOANS)	
	(Note: Substitute in lieu of Line #6	of Summary Page for this report only; subt	ract Line 20(d) from Line 11(e))
	0.00	128989.74	0.00

## **IV. NET OPERATING EXPENDITURES**

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

	309.10 145097.85	108.17
	V. CASH SUMMARY	
23.	CASH ON HAND AT BEGINNING OF REPORTING PERIOD	1822.85
24.	TOTAL RECIEPTS THIS PERIOD (from Line 16)	259.57
25.	SUBTOTAL (add Line 23 and Line 24)	2082.42
26.	TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	568.67
27.	CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	1513.75

FE1AN044

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 7 OF 14 (check only one)		
			Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$		
			person for the purpose of soliciting contributions			
or	for commercial purposes, other than using the	e name and	address of any political committe	ee to solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) Kiaaina for Congress					
ے ۸.	Full Name (Last, First, Middle Initial) Hawaiian Telcom			Date of Receipt		
А.	Mailing Address PO Box 30770	11 27 2012				
	City Honolulu	State HI	Zip Code 96820-0770	Transaction ID : C9675302		
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period		
	Name of Employer	Occupation	n	259.57		
	Receipt For: 2014	Election C	ycle-to-Date			
	Primary General Other (specify)		259.57	Refund		
_	Full Name (Last, First, Middle Initial)			Date of Receipt		
В.	Mailing Address			M M / D D / Y Y Y Y		
	City	State	Zip Code			
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period		
	Name of Employer	Occupation	n	, ,		
	Receipt For:	Election C	ycle-to-Date	-		
	Primary General			1		
	Other (specify)	L	y y			
_	Full Name (Last, First, Middle Initial)			Date of Receipt		
C.	Mailing Address			M M / D D / Y Y Y Y		
	City	State	Zip Code			
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period		
	Name of Employer	Occupation	n			
	Receipt For:	Election C	ycle-to-Date			
	Other (specify)		, ,	]		
5	UBTOTAL of Receipts This Page (optional)			259.57		
,	<b>OTAL</b> This Period (last page this line number of	only)		259.57		
•						

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate scl for each categor Detailed Summar	y of the	FOR LINE NUMBER:         PAGE         8         OF         14           (check only one)         X         17         18         19a         19b           20a         20b         20c         21
	y information copied from such Reports and Statements m for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full)			
	Kiaaina for Congress			
Α.	Full Name (Last, First, Middle Initial) First Hawaiian Bank			Date of Disbursement
	Mailing Address 3599 Waialae Ave			12 01 2012
	City State Honolulu HI	Zip Code 96816-2759		Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Fee			9.99 Transaction ID : D674898
	Candidate Name		Category, Type	·
	Office Sought: House Disbursement For Senate President Other (s	General		
	State:         District:           Full Name (Last, First, Middle Initial)			
В.	First Hawaiian Bank			Date of Disbursement
	Mailing Address 3599 Waialae Ave			
	City State Honolulu HI	Zip Code 96816-2759		Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Fee		· · · ·	9.99 Transaction ID : D674901
	Candidate Name		Category, Type	
	Office Sought: House Disbursement For Senate Primary President Other (s	K General		
	Full Name (Last, First, Middle Initial)			
C.	First Hawaiian Bank			Date of Disbursement
	Mailing Address 3599 Waialae Ave			
		p Code 6816-2759		Amount of Each Disbursement this Period
Purpose of Disbursement Bank Fee Candidate Name		0010 2100		9.99
			Category, Type	Transaction ID : D674905
	Office Sought: House Disbursement For Senate President Other (s State: District:	X General		
s	UBTOTAL of Disbursements This Page (optional)			29.97
	OTAL This Period (last page this line number only)			

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS Any information copied from such Reports and Stateme or for commercial purposes, other than using the name		ule(s) f the Page ed by any p	
NAME OF COMMITTEE (In Full) Kiaaina for Congress	· · ·		
Full Name (Last, First, Middle Initial) A. NGP VAN			Date of Disbursement
Mailing Address 1101 15th St NW Ste 500			10 29 2012
City Sta Washington DC	te Zip Code 20005-5006		Amount of Each Disbursement this Period
Purpose of Disbursement Database Service	1		125.00 Transaction ID : D674902
Candidate Name	L	Category/ Type	
Senate Pri President Ot	nt For: 2012 imary X General her (specify)		
State: District: Full Name (Last, First, Middle Initial)			
B. Project Accounting Services			Date of Disbursement
Mailing Address 603 Stewart St Ste 819			
City Sta Seattle WA	1		Amount of Each Disbursement this Period
Purpose of Disbursement Accounting/Compliance	[		357.75 Transaction ID : D674899
Candidate Name		Category/ Type	
Senate Pri President Ot	nt For: 2014 imary General her (specify)		
State: District: Full Name (Last, First, Middle Initial)			
С.			Date of Disbursement
Mailing Address			
City State	Zip Code		Amount of Each Disbursement this Period
Purpose of Disbursement	[		
Candidate Name		Category/ Type	
	nt For: imary General her (specify)		
SUBTOTAL of Disbursements This Page (optional)			482.75
TOTAL This Period (last page this line number only)			512.72

age# 13960530553					PAGE 10 OF 14	
CHEDULE C (FEC Form 3) DANS				Use separate schedule(s) for each category of the Detailed Summary Page		
ME OF COMMITTEE (In Full)				Transac	tion ID : L1000	
LOAN SOURCE Full Name Esther Kiaaina PERS	•	ddle Initial)		[PERSONAL FUNDS]	Election: 2012 Primary General	
Mailing Address 89-564 Farrington Highway					Other (specify)	
City		State	ZIP Code			
Waianae		н	96792			
Original Amount of Loan	10000.00	Cumulative Pa	ayment To D	ate Bala	nce Outstanding at Close of This Perio 10000.00	
TERMS Date Incurred 01 <sup>M</sup> / 031 <sup>D</sup> / Y List All Endorsers or Guar	ž012 <sup>Y</sup>	M M / D	r	Interest Rate		
1. Full Name (Last, First, M		0 LUAN SOURCE		Name of Employer		
Mailing Address						
City	State	ZIP Code		Amount Guaranteed Dutstanding:	y 1 y 1 x 1	
2. Full Name (Last, First, M	ddle Initial)		1	Name of Employer		
Mailing Address				Dccupation		
City	State	ZIP Code		Amount Guaranteed Dutstanding:	y 1 y 1 x 1	
3. Full Name (Last, First, M	ddle Initial)		1	Name of Employer		
Mailing Address			(	Dccupation		
City	State	ZIP Code	(	Amount Guaranteed Dutstanding:		
4. Full Name (Last, First, M	ddle Initial)		1	Name of Employer		
Mailing Address				Dccupation		
City	State	ZIP Code	(	Amount Guaranteed Dutstanding:	y 1 y 1 x x 1	
UBTOTALS This Period This OTALS This Period (last page	in this line only	y)			10000.00	

nage# 13960530554			
CHEDULE C (FEC Form 3) DANS		Use separate schedule(s for each category of the Detailed Summary Page	(check only one) X 13a
AME OF COMMITTEE (In Full) Kiaaina for Congress		Transactio	on ID : L1035
LOAN SOURCE Full Name (Last, First, Mi Esther Kiaaina PERS FUNDS	ddle Initial)	[· _···································	Election: 2012 Primary General
Mailing Address 89-564 Farrington Highway			Other (specify)
City	State ZIP Co	de	
Waianae	HI 96792		
Original Amount of Loan	Cumulative Payment To	Date Balanc	ce Outstanding at Close of This Perio 1000.00
TERMS Date Incurred M06 / D05 / Y 2012		Interest Rate	Secured: % (apr) Yes No
List All Endorsers or Guarantors (if any) t	to Loan Source	Name of Employer	
1. Full Name (Last, First, Middle Initial)			
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	y 1 y 1 y 1
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	y
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	y
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	y 1 y 1 x 1
SUBTOTALS This Period This Page (optional).	y)		1000.00

age# 13960530555			
CHEDULE C (FEC Form 3) DANS		Use separate schedule(s for each category of the Detailed Summary Page	$e^{-1}$ (check only one) X 13a
AME OF COMMITTEE (In Full) Liaaina for Congress		Transacti	ion ID : L1037
LOAN SOURCE Full Name (Last, First, Esther Kiaaina PERS FUNDS	,	[PERSONAL FUNDS]	Election: 2012 Primary General
Mailing Address 89-564 Farrington Highway			Other (specify)
City	State ZIP Co	ode	
Waianae	HI 96792		
Original Amount of Loan 2000.00	Cumulative Payment To	0 Date Balan 0.00	nce Outstanding at Close of This Perio 2000.00
TERMS	Deta Dua	laterest Date	
Date Incurred	Date Due	Interest Rate	Secured:
List All Endorsers or Guarantors (if any	y) to Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	e ZIP Code	Amount Guaranteed Outstanding:	y
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	g 1 g 1 g 1 g 1 g 1 g 1 g 1 g 1 g 1 g 1
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	e ZIP Code	Amount Guaranteed Outstanding:	y
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 1 1
UBTOTALS This Period This Page (option OTALS This Period (last page in this line of Carry outstanding balance only to LINE 3.	only)		2000.00

age# 13960530556				
HEDULE C (FEC FO ANS	orm 3)		Use separate sched for each category o Detailed Summary F	f the (check only one) X 13a
ME OF COMMITTEE (In Full) iaaina for Congress			Trans	saction ID : L1038
LOAN SOURCE Full Name Esther Kiaaina PERS	•	ddle Initial)	[PERSONAL FUNDS]	Election: 2012 Primary General
Mailing Address 89-564 Farrington Highway				Other (specify)
City		State	ZIP Code	
Waianae		HI	96792	
Original Amount of Loan	5000.00	Cumulative Payn	nent To Date Ba	alance Outstanding at Close of This Perio
TERMS		77	9	<u> </u>
Date Incurred	ž01ž <sup>v</sup>	Da M M / D D	HUHE	ate Secured: .00 % (apr) Yes N
List All Endorsers or Guara	ntors (if any) t	o Loan Source		103 10
1. Full Name (Last, First, M	iddle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Mic	ddle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Mid	ddle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Mic	ddle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
JBTOTALS This Period This F				5000.00 7 18000.00

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS Excluding Loans NAME OF COMMITTEE (In Full) Kiaaina for Congress A. Full Name (Last, First, Middle Initial) of Debto Esther Kiaaina Mailing Address 89-564 Farrington Highway	r or Creditor	(Use separate schedule(s) for each numbered line) Nature of D Ad Produc	PAGE 14 OF 14 FOR LINE NUMBER: (check only one) 9 X 10 rebt (Purpose):
City State Waianae	Zip Code HI 96792		
Outstanding Balance Beginning This Period 4000.00 Amount Incurred This Period 0.00	Payment This Period		on ID : D632971 ng Balance at Close of This Period 4000.00
B. 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 Period Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
C. Full Name (Last, First, Middle Initial) of Debto	or or Creditor	Nature of D	ebt (Purpose):
Mailing Address City	State Zip Code		
Outstanding Balance Beginning This Period Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
1) SUBTOTALS This Period This Page (optional)			4000.00
<ul> <li>2) TOTALS This Period (last page this line number</li> <li>3) TOTAL OUTSTANDING LOANS from Schedule</li> </ul>		18000.00	
4) ADD 2) and 3) and carry forward to appropriate	line of Summary Page (last page of	nly) 🕨	7

FEC Schedule D (Form 3) (Revised 02/2003)