



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Hawaii Democratic Party**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="48990.01"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="83804.47"/>	<input type="text" value="83654.47"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="132794.48"/>	<input type="text" value="83654.47"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="52986.63"/>	<input type="text" value="52986.63"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="79807.85"/>	<input type="text" value="30667.84"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="2000.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**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

**Hawaii Democratic Party**

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2012 To: M M / D D / Y Y Y Y 03 / 31 / 2012

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	3650.00	3500.00
(ii) Unitemized .....	1556.00	1556.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5206.00	5056.00
(b) Political Party Committees .....	4171.17	4171.17
(c) Other Political Committees (such as PACs).....	528.26	528.26
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	9905.43	9755.43
12. Transfers From Affiliated/Other Party Committees.....	2209.04	2209.04
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	56500.00	56500.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	15190.00	15190.00
18. Transfers from Non-Federal and Levin Funds		
(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
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	83804.47	83654.47
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	83804.47	83654.47

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	52886.63	52886.63
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	52886.63	52886.63
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(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 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	100.00	100.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	52986.63	52986.63
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	52986.63	52986.63

**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
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	9905.43	9755.43
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	9905.43	9755.43
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	52886.63	52886.63
37. Offsets to Operating Expenditures (from Line 15, page 3).....	56500.00	56500.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	-3613.37	-3613.37

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

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

FOR LINE NUMBER: PAGE 6 OF 38  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Hawaii Democratic Party**

Full Name (Last, First, Middle Initial)  
**A. Wendell Fuji**

Mailing Address 1544 Kalaepohaku Pl

City Honolulu State HI Zip Code 96816

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

Name of Employer Occupation Information Requested

Receipt For: 2012  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 05 / 2012  
**Transaction ID : C8134453**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**B. Alan Goda**

Mailing Address 127 Dowsett Ave

City Honolulu State HI Zip Code 96817

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

Name of Employer Occupation Information Requested

Receipt For: 2012  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 05 / 2012  
**Transaction ID : C8134456**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. Edwim H Hiraki**

Mailing Address 1561 Kanunu St., Apt 802

City Honolulu State HI Zip Code 96814

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

Name of Employer Occupation Information Requested

Receipt For: 2012  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2012  
**Transaction ID : C8137656**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1100.00

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

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

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

FOR LINE NUMBER: PAGE 7 OF 38  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Hawaii Democratic Party**

Full Name (Last, First, Middle Initial)  
**A. Bert Kobayashi**

Mailing Address 999 Bishop St. 23rd Floor

City Honolulu State HI Zip Code 96813

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

Name of Employer House of Representatives Occupation 415 S. Beretania St

Receipt For: 2012  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 05 / 2012**

**Transaction ID : C8134452**

Amount of Each Receipt this Period  
**500.00**

Full Name (Last, First, Middle Initial)  
**B. Bruce A Nakamura**

Mailing Address 2607 Oahu Ave.

City Honolulu State HI Zip Code 96822

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 05 / 2012**

**Transaction ID : C8134455**

Amount of Each Receipt this Period  
**500.00**

Full Name (Last, First, Middle Initial)  
**C. Alan Van Etten**

Mailing Address 810 Richards St. Ste 700

City Honolulu State HI Zip Code 96813

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 05 / 2012**

**Transaction ID : C8134454**

Amount of Each Receipt this Period  
**1000.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **2000.00**

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

**SCHEDULE A (FEC Form 3X)  
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	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Hawaii Democratic Party**

**A. Kelly Takaya King**  
Full Name (Last, First, Middle Initial)

Mailing Address 72 Kalola Pl.

City State Zip Code  
Kihei HI 96753

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
405.00

Date of Receipt  
03 / 15 / 2012  
Transaction ID : **C8138399A**

Amount of Each Receipt this Period  
250.00

\* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1310.00

Date of Receipt  
03 / 15 / 2012  
Transaction ID : **C8138399AB**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**C. Steven Levinson**  
Full Name (Last, First, Middle Initial)

Mailing Address 3430-F Keahi Place

City State Zip Code  
Honolulu HI 96822

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

Name of Employer Occupation  
Retired Justice

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
02 / 01 / 2012  
Transaction ID : **C8138380A**

Amount of Each Receipt this Period  
250.00

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00

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

**SCHEDULE A (FEC Form 3X)  
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	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Hawaii Democratic Party**

**A. ACTBLUE**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 382110

City CAMBRIDGE	State MA	Zip Code 02238
FEC ID number of contributing federal political committee. <b>C</b> C00401224		
Name of Employer	Occupation	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Conduit total listed in Agg. field
		Aggregate Year-to-Date ▼ 1310.00

Date of Receipt  
MM / DD / YYYY  
02 / 01 / 2012  
**Transaction ID : C8138380AB**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B. Charles Prentiss**  
Full Name (Last, First, Middle Initial)  
Mailing Address 519 Wanaao Rd

City Kailua	State HI	Zip Code 96734
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Information Requested	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Conduit total listed in Agg. field
		Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2012  
**Transaction ID : C8138389A**

Amount of Each Receipt this Period  
50.00

\* Earmarked Contribution: See Below

**C. ACTBLUE**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 382110

City CAMBRIDGE	State MA	Zip Code 02238
FEC ID number of contributing federal political committee. <b>C</b> C00401224		
Name of Employer	Occupation	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Conduit total listed in Agg. field
		Aggregate Year-to-Date ▼ 1310.00

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2012  
**Transaction ID : C8138389AB**

Amount of Each Receipt this Period  
50.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....	50.00
<b>TOTAL</b> This Period (last page this line number only).....	3650.00

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

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

FOR LINE NUMBER: PAGE 10 OF 38  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Hawaii Democratic Party**

**A. Democratic National Committee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 430 South Capitol Street, S.E.  
 City Washington State DC Zip Code 20003  
 FEC ID number of contributing federal political committee. **C** C00010603  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 34171.17

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 13 / 2012  
**Transaction ID : C8137577**  
 Amount of Each Receipt this Period  
 4171.17

**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) ▼  
 Aggregate Year-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) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4171.17
<b>TOTAL</b> This Period (last page this line number only).....▶	4171.17

**SCHEDULE A (FEC Form 3X)  
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	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Hawaii Democratic Party**

**A. ACTBLUE**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 382110

City CAMBRIDGE	State MA	Zip Code 02238
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation
------------------	------------

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
528.26

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 01 / 2012  
**Transaction ID : C8138379**

Amount of Each Receipt this Period  
 240.12

**B. ACTBLUE**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 382110

City CAMBRIDGE	State MA	Zip Code 02238
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation
------------------	------------

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
528.26

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 13 / 2012  
**Transaction ID : C8138370A**

Amount of Each Receipt this Period  
 96.05

\* Earmarked Contribution: See Below

**C. Isaac Mowoe**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 631

City Wailuku	State HI	Zip Code 96793
-----------------	-------------	-------------------

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

Name of Employer	Occupation
Retired	Conduit total listed in Agg. field

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
96.05

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 13 / 2012  
**Transaction ID : C8138370AB**

Amount of Each Receipt this Period  
 96.05

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this individual.

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	336.17
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 38
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Hawaii Democratic Party**

Full Name (Last, First, Middle Initial)  
**A. ACTBLUE**

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
528.26

Date of Receipt  
01 / 25 / 2012  
**Transaction ID : C8138369A**

Amount of Each Receipt this Period  
24.01

\* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)  
**B. Tiffany Patrick**

Mailing Address 355 Aoloo St. APt G-105

City State Zip Code  
Kailua HI 96734

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

Name of Employer Occupation  
U. S. Marine Corp  
Conduit total listed in Agg. field

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
24.01

Date of Receipt  
01 / 25 / 2012  
**Transaction ID : C8138369AB**

Amount of Each Receipt this Period  
24.01

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this individual.

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
528.26

Date of Receipt  
02 / 15 / 2012  
**Transaction ID : C8138393A**

Amount of Each Receipt this Period  
24.01

\* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....	48.02
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 38
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Hawaii Democratic Party**

**A. Rosalie Gordon**  
Full Name (Last, First, Middle Initial)  
Mailing Address POB 266

City Hanalei	State HI	Zip Code 96714
-----------------	-------------	-------------------

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

Name of Employer Na Pali Properties	Occupation Conduit total listed in Agg. field
--	--

Receipt For: 2012  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **24.01**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	15	/	2012

**Transaction ID : C8138393AB**

Amount of Each Receipt this Period  

24.01
-------

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this individual.

**B. ACTBLUE**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 382110

City CAMBRIDGE	State MA	Zip Code 02238
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer	Occupation
------------------	------------

Receipt For: 2012  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **528.26**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2012

**Transaction ID : C8138395A**

Amount of Each Receipt this Period  

96.05
-------

\* Earmarked Contribution: See Below

**C. Barry Lienert**  
Full Name (Last, First, Middle Initial)  
Mailing Address 41-1702C Kalaniana'ole

City Waimanalo	State HI	Zip Code 96795
-------------------	-------------	-------------------

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

Name of Employer University of Hawaii	Occupation Conduit total listed in Agg. field
--	--

Receipt For: 2012  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **96.05**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2012

**Transaction ID : C8138395AB**

Amount of Each Receipt this Period  

96.05
-------

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this individual.

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>96.05</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 14 OF 38  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Hawaii Democratic Party**

Full Name (Last, First, Middle Initial)  
**A. ACTBLUE**

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
528.26

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 15 / 2012

**Transaction ID : C8138401A**

Amount of Each Receipt this Period  
48.02

\* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial)  
**B. Cynthia Lowry**

Mailing Address 47-329 Lulani St.

City State Zip Code  
Kaneohe HI 96744

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

Name of Employer Occupation  
Self Employed Conduit total listed in Agg. field

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
48.02

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 15 / 2012

**Transaction ID : C8138401AB**

Amount of Each Receipt this Period  
48.02

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this individual.

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

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) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	48.02
<b>TOTAL</b> This Period (last page this line number only).....▶	528.26

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

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

FOR LINE NUMBER: PAGE 15 OF 38  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Hawaii Democratic Party**

**A. Democratic Party Of Hawai'i**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1050 Ala Moana Blvd. Ste 2150

City Honolulu	State HI	Zip Code 96814
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00212787

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4209.04

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03	/	21	/	2012

**Transaction ID : C8137676**

Amount of Each Receipt this Period  
2209.04

**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) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	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) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2209.04
<b>TOTAL</b> This Period (last page this line number only).....▶	2209.04

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 38
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Hawaii Democratic Party**

**A. Community Leadership PAC 09/11**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2111 Wilson Blvd  
 FI 8  
 City Arlington State VA Zip Code 22201-3001  
 FEC ID number of contributing federal political committee. **C** C00501775  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 25000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 15 / 2012  
**Transaction ID : C8137672**  
 Amount of Each Receipt this Period  
 25000.00

**B. Democratic National Committee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 430 South Capitol Street, S.E.  
 City Washington State DC Zip Code 20003  
 FEC ID number of contributing federal political committee. **C** C00010603  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 34171.17

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 06 / 2012  
**Transaction ID : C8137561**  
 Amount of Each Receipt this Period  
 7500.00

**C. Democratic National Committee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 430 South Capitol Street, S.E.  
 City Washington State DC Zip Code 20003  
 FEC ID number of contributing federal political committee. **C** C00010603  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 34171.17

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 25 / 2012  
**Transaction ID : C8137646**  
 Amount of Each Receipt this Period  
 2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	35000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 38
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Hawaii Democratic Party**

**A. Democratic National Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 430 South Capitol Street, S.E.

City Washington	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
34171.17

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	06	/	2012

**Transaction ID : C8137648**

Amount of Each Receipt this Period  
10000.00

**B. Democratic National Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 430 South Capitol Street, S.E.

City Washington	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
34171.17

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2012

**Transaction ID : C8137657**

Amount of Each Receipt this Period  
10000.00

**C. Obama For America**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 8102

City Chicago	State IL	Zip Code 60680
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00494740

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	05	/	2012

**Transaction ID : C8137591**

Amount of Each Receipt this Period  
1500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	21500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	56500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 38
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Hawaii Democratic Party**

**A. Democratic Party Of Hawai'i**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1050 Ala Moana Blvd. Ste 2150

City Honolulu	State HI	Zip Code 96814
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00212787

Name of Employer	Occupation
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4209.04

Date of Receipt  
03 / 21 / 2012  
**Transaction ID : C8137675**

Amount of Each Receipt this Period  
2000.00

State Party Convention fees

**B. Michael D Gillespie**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1441 Piikoi St. Apt 504

City Honolulu	State HI	Zip Code 96822
------------------	-------------	-------------------

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

Name of Employer Self Employed	Occupation Computer Programmer
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
01 / 03 / 2012  
**Transaction ID : C8137583**

Amount of Each Receipt this Period  
1500.00

**C. Edwim H Hiraki**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1561 Kanunu St., Apt 802

City Honolulu	State HI	Zip Code 96814
------------------	-------------	-------------------

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

Name of Employer Information Requested	Occupation Information Requested
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
03 / 20 / 2012  
**Transaction ID : C7975434**

Amount of Each Receipt this Period  
175.00

State Party Convention fees

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3675.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Form/Schedule: SA17

Transaction ID : C7975434

2012 state convention fee

Form/Schedule:

Transaction ID:

**SCHEDULE A (FEC Form 3X)  
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	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Hawaii Democratic Party**

Full Name (Last, First, Middle Initial)  
**A. Donna M Kim**

Mailing Address 1745 A Ala Amoamo St

City Honolulu State HI Zip Code 96819

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

Name of Employer State of Hawaii Occupation State Senator

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2012  
**Transaction ID : C8137678**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**B. Kelly Takaya King**

Mailing Address 72 Kalola Pl.

City Kihei State HI Zip Code 96753

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
405.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2012  
**Transaction ID : C7975766**

Amount of Each Receipt this Period  
155.00

State Party Convention fees

Full Name (Last, First, Middle Initial)  
**c. Obama For America**

Mailing Address P.O. Box 8102

City Chicago State IL Zip Code 60680

FEC ID number of contributing federal political committee. **C C00494740**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 05 / 2012  
**Transaction ID : C8137587**

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3655.00
<b>TOTAL</b> 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: SA17

Transaction ID : C7975766

2012 state convention fee

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 38
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Hawaii Democratic Party**

Full Name (Last, First, Middle Initial) <b>A. Charles Prentiss</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2012 <b>Transaction ID : C8137680</b>
Mailing Address 519 Wanaao Rd		Amount of Each Receipt this Period 175.00
City Kailua	State HI	Zip Code 96734
FEC ID number of contributing federal political committee. C		State Party Convention fees
Name of Employer Retired	Occupation Information Requested	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>B. Inam Rahman</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 26 / 2012 <b>Transaction ID : C8137650</b>
Mailing Address P.O. Box 15788		Amount of Each Receipt this Period 750.00
City Honolulu	State HI	Zip Code 96830
FEC ID number of contributing federal political committee. C		
Name of Employer Inam Rahman M.D., INC	Occupation Doctor	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) <b>C. Connie Rebert</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 20 / 2012 <b>Transaction ID : C7975786</b>
Mailing Address 447 Mananai Pl., #34B		Amount of Each Receipt this Period 275.00
City Honolulu	State HI	Zip Code 96818
FEC ID number of contributing federal political committee. C		State Party Convention fees
Name of Employer Information Requested	Occupation retired	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	8530.00

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

Form/Schedule: SA17

Transaction ID : C7975786

2012 state convention fee + 1guest

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Hawaii Democratic Party**

Full Name (Last, First, Middle Initial)

**A. Ms. Sarah E Beamer**

Mailing Address 320 Iliha St.

City Kailua State HI Zip Code 96734

Purpose of Disbursement  
Payroll

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 13 / 2012

**Transaction ID : D430976**

Amount of Each Disbursement this Period

1120.35

Full Name (Last, First, Middle Initial)

**B. Ms. Sarah E Beamer**

Mailing Address 320 Iliha St.

City Kailua State HI Zip Code 96734

Purpose of Disbursement  
Payroll

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 31 / 2012

**Transaction ID : D430989**

Amount of Each Disbursement this Period

1120.35

Full Name (Last, First, Middle Initial)

**C. Ms. Sarah E Beamer**

Mailing Address 320 Iliha St.

City Kailua State HI Zip Code 96734

Purpose of Disbursement  
Payroll

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 14 / 2012

**Transaction ID : D430994**

Amount of Each Disbursement this Period

1120.35

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

3361.05

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Hawaii Democratic Party**

Full Name (Last, First, Middle Initial)

**A. Ms. Sarah E Beamer**

Mailing Address 320 Ilihau St.

City Kailua State HI Zip Code 96734

Purpose of Disbursement  
Reimbursement for Presidential Preference Poll Ad on Kauai

004

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 29 / 2012

**Transaction ID : D431072**

Amount of Each Disbursement this Period

801.80

Full Name (Last, First, Middle Initial)

**B. Ms. Sarah E Beamer**

Mailing Address 320 Ilihau St.

City Kailua State HI Zip Code 96734

Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 29 / 2012

**Transaction ID : D431082**

Amount of Each Disbursement this Period

1120.35

Full Name (Last, First, Middle Initial)

**C. Ms. Sarah E Beamer**

Mailing Address 320 Ilihau St.

City Kailua State HI Zip Code 96734

Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 15 / 2012

**Transaction ID : D431114**

Amount of Each Disbursement this Period

1120.35

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

3042.50

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Hawaii Democratic Party**

Full Name (Last, First, Middle Initial)

**A. Ms. Sarah E Beamer**

Mailing Address 320 Ilihu St.

City Kailua State HI Zip Code 96734

Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 30 / 2012

**Transaction ID : D431190**

Amount of Each Disbursement this Period

1120.35

Full Name (Last, First, Middle Initial)

**B. City and County of Honolulu**

Mailing Address 530 S. King St. Rm 100

City Honolulu State HI Zip Code 96816

Purpose of Disbursement  
Purchase voterfile update

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 30 / 2012

**Transaction ID : D431186**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Mr. Charles Freedman**

Mailing Address 731  
Ocean View Drive

City Honolulu State HI Zip Code 96816

Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 20 / 2012

**Transaction ID : D431101**

Amount of Each Disbursement this Period

1102.64

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

2472.99

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Hawaii Democratic Party**

Full Name (Last, First, Middle Initial)

**A. Mr. Charles Freedman**

Mailing Address 731

Ocean View Drive

City

Honolulu

State

HI

Zip Code

96816

Purpose of Disbursement

Payroll

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	20	/	2012

**Transaction ID : D431106**

Amount of Each Disbursement this Period

1102.64
---------

Full Name (Last, First, Middle Initial)

**B. Mr. Charles Freedman**

Mailing Address 731

Ocean View Drive

City

Honolulu

State

HI

Zip Code

96816

Purpose of Disbursement

Payroll

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01	/	31	/	2012

**Transaction ID : D430991**

Amount of Each Disbursement this Period

1102.64
---------

Full Name (Last, First, Middle Initial)

**C. Mr. Charles Freedman**

Mailing Address 731

Ocean View Drive

City

Honolulu

State

HI

Zip Code

96816

Purpose of Disbursement

Payroll

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	20	/	2012

**Transaction ID : D430992**

Amount of Each Disbursement this Period

1102.64
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

3307.92
---------

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

--

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Hawaii Democratic Party**

Full Name (Last, First, Middle Initial)

**A. Mr. Charles Freedman**

Mailing Address 731  
Ocean View Drive

City Honolulu State HI Zip Code 96816

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

001

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 13 / 2012

Transaction ID : D430971

Amount of Each Disbursement this Period

1102.64

Full Name (Last, First, Middle Initial)

**B. Mr. Charles Freedman**

Mailing Address 731  
Ocean View Drive

City Honolulu State HI Zip Code 96816

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

001

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 30 / 2012

Transaction ID : D431192

Amount of Each Disbursement this Period

1119.50

Full Name (Last, First, Middle Initial)

**C. Mrs. Deborah E Hartmann**

Mailing Address 54-178 Hauula Hmstd. Rd.

City Hauula State HI Zip Code 96717

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

001

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 30 / 2012

Transaction ID : D431191

Amount of Each Disbursement this Period

1738.54

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

3960.68

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Hawaii Democratic Party**

Full Name (Last, First, Middle Initial)

**A. Mrs. Deborah E Hartmann**

Mailing Address 54-178 Hauula Hmstd. Rd.

City Hauula State HI Zip Code 96717

Purpose of Disbursement  
Payroll

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	5		2	0	1	2

**Transaction ID : D430978**

Amount of Each Disbursement this Period

1	7	3	8	.	5	4
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Mrs. Deborah E Hartmann**

Mailing Address 54-178 Hauula Hmstd. Rd.

City Hauula State HI Zip Code 96717

Purpose of Disbursement  
Payroll

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	1	2

**Transaction ID : D430995**

Amount of Each Disbursement this Period

1	7	3	8	.	5	4
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Mrs. Deborah E Hartmann**

Mailing Address 54-178 Hauula Hmstd. Rd.

City Hauula State HI Zip Code 96717

Purpose of Disbursement  
Payroll

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	1	2

**Transaction ID : D431118**

Amount of Each Disbursement this Period

1	7	3	8	.	5	4
---	---	---	---	---	---	---

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

5	2	1	5	.	6	2
---	---	---	---	---	---	---

--	--	--	--	--	--	--

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Hawaii Democratic Party**

Full Name (Last, First, Middle Initial)

**A. Mrs. Deborah E Hartmann**

Mailing Address 54-178 Hauula Hmstd. Rd.

City Hauula State HI Zip Code 96717

Purpose of Disbursement  
Payroll

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D431090**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Mrs. Deborah E Hartmann**

Mailing Address 54-178 Hauula Hmstd. Rd.

City Hauula State HI Zip Code 96717

Purpose of Disbursement  
Payroll

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D431094**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Hawaii Department of Taxation**

Mailing Address P.O. Box 3827

City Honolulu State HI Zip Code 96812

Purpose of Disbursement  
Payroll Withholding Tax

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D431152**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Hawaii Democratic Party**

Full Name (Last, First, Middle Initial)

**A. Hawaii Department of Taxation**

Mailing Address P.O. Box 3827

City Honolulu State HI Zip Code 96812

Purpose of Disbursement  
Payroll Withholding Tax

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 20 / 2012

Transaction ID : D431158

Amount of Each Disbursement this Period

717.86

Full Name (Last, First, Middle Initial)

**B. Hawaii State Tax Collector**

Mailing Address P.O. Box 3223

City Honolulu State HI Zip Code 96801

Purpose of Disbursement  
Tax Collections

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 20 / 2012

Transaction ID : D431166

Amount of Each Disbursement this Period

1463.75

Full Name (Last, First, Middle Initial)

**C. Hawaii Tribune-Herald**

Mailing Address 355 Kinoole St

City Hilo State HI Zip Code 96720-2977

Purpose of Disbursement  
Presidential Preference Poll Advertisement

004

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 29 / 2012

Transaction ID : D431059

Amount of Each Disbursement this Period

748.80

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

2930.41

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Hawaii Democratic Party**

Full Name (Last, First, Middle Initial)

**A. Hawaiian Telcom**

Mailing Address PO Box 30770

City Honolulu State HI Zip Code 96820-0770

Purpose of Disbursement Telephone and Cable

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 23 / 2012

**Transaction ID : D431000**

Amount of Each Disbursement this Period

1126.82

Full Name (Last, First, Middle Initial)

**B. Hawaiian Telcom**

Mailing Address PO Box 30770

City Honolulu State HI Zip Code 96820-0770

Purpose of Disbursement Telephone and Cable

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 20 / 2012

**Transaction ID : D431131**

Amount of Each Disbursement this Period

369.94

Full Name (Last, First, Middle Initial)

**C. Kaiser Foundation Health Plan**

Mailing Address PO Box 29080

City Honolulu State HI Zip Code 96820-1480

Purpose of Disbursement Personnell Health Insurance Coverage

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 12 / 2012

**Transaction ID : D430982**

Amount of Each Disbursement this Period

650.37

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

2147.13

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Hawaii Democratic Party**

Full Name (Last, First, Middle Initial)

**A. Kaiser Foundation Health Plan**

Mailing Address PO Box 29080

City Honolulu State HI Zip Code 96820-1480

Purpose of Disbursement  
Personnell Health Insurance Coverage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 15 / 2012

**Transaction ID : D431123**

Amount of Each Disbursement this Period

1300.74

Full Name (Last, First, Middle Initial)

**B. Mr. Jason H Kamalu-Grupen**

Mailing Address 47-168 Iuiu St.

City Kaneohe State HI Zip Code 96744

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 15 / 2012

**Transaction ID : D431111**

Amount of Each Disbursement this Period

1146.64

Full Name (Last, First, Middle Initial)

**C. Mr. Jason H Kamalu-Grupen**

Mailing Address 47-168 Iuiu St.

City Kaneohe State HI Zip Code 96744

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 30 / 2012

**Transaction ID : D431189**

Amount of Each Disbursement this Period

1146.64

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

3594.02

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Hawaii Democratic Party**

Full Name (Last, First, Middle Initial)

**A. Mr. Jason H Kamalu-Grupen**

Mailing Address 47-168 Iuiu St.

City Kaneohe State HI Zip Code 96744

Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	9		2	0	1	2

Transaction ID : D431097

Amount of Each Disbursement this Period

1	1	4	6	.	6	4
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Mr. Jason H Kamalu-Grupen**

Mailing Address 47-168 Iuiu St.

City Kaneohe State HI Zip Code 96744

Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	1	2

Transaction ID : D430988

Amount of Each Disbursement this Period

1	1	4	6	.	6	4
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Mr. Jason H Kamalu-Grupen**

Mailing Address 47-168 Iuiu St.

City Kaneohe State HI Zip Code 96744

Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	1	2

Transaction ID : D430974

Amount of Each Disbursement this Period

1	1	4	6	.	6	4
---	---	---	---	---	---	---

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

3	4	3	9	.	9	2
---	---	---	---	---	---	---

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

3	4	3	9	.	9	2
---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Hawaii Democratic Party**

Full Name (Last, First, Middle Initial)

**A. Mr. Jason H Kamalu-Grupen**

Mailing Address 47-168 Iuiu St.

City Kaneohe State HI Zip Code 96744

Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 14 / 2012

**Transaction ID : D430993**

Amount of Each Disbursement this Period

1146.64

Full Name (Last, First, Middle Initial)

**B. Sheraton Waikiki**

Mailing Address 2255 Kalakaua Ave

City Honolulu State HI Zip Code 96815-2579

Purpose of Disbursement  
Deposit Facility Rental Convention Site 2012

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 13 / 2012

**Transaction ID : D430985**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Star-Advertiser**

Mailing Address 500 Ala Moana Blvd  
Ste 7500

City Honolulu State HI Zip Code 96813-4992

Purpose of Disbursement  
Presidential Preference Poll Advertisement

004

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2012

**Transaction ID : D431052**

Amount of Each Disbursement this Period

2396.86

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

8543.50

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Hawaii Democratic Party**

Full Name (Last, First, Middle Initial)

**A. The Maui News**

Mailing Address 100 Mahalani St

City Wailuku State HI Zip Code 96793-2529

Purpose of Disbursement  
Presidential Preference Poll Advertisement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 29 / 2012

**Transaction ID : D431061**

Amount of Each Disbursement this Period

819.00

Full Name (Last, First, Middle Initial)

**B. Toshiba Financial SVCS**

Mailing Address PO Box 41602

City Philadelphia State PA Zip Code 19101-1602

Purpose of Disbursement  
Monthly Rental for Copy Machine

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 12 / 2012

**Transaction ID : D430983**

Amount of Each Disbursement this Period

475.83

Full Name (Last, First, Middle Initial)

**C. Ward Plaza-Warehouse, LLC**

Mailing Address 1240 Ala Moana Blvd  
P.O. Box 31000

City Honolulu State HI Zip Code 96814-4260

Purpose of Disbursement  
Rent owed

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 12 / 2012

**Transaction ID : D430980**

Amount of Each Disbursement this Period

2211.59

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

3506.42

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Hawaii Democratic Party**

Full Name (Last, First, Middle Initial)

**A. Ward Plaza-Warehouse, LLC**

Mailing Address 1240 Ala Moana Blvd  
P.O. Box 31000

City Honolulu State HI Zip Code 96814-4260

Purpose of Disbursement  
Rent owed

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D431038**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. West Hawaii Today**

Mailing Address 75-5580 Kuakini Hwy

City Kailua Kona State HI Zip Code 96740-1647

Purpose of Disbursement  
Presidential Preference Poll Advertisement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D431058**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

**SCHEDULE D (FEC Form 3X)**

**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)  
**Hawaii Democratic Party**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Democratic National Committee</b>	Nature of Debt (Purpose): Repayment of Loan
Mailing Address 430 South Capitol Street, S.E.	
City State Zip Code Washington DC 20003	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D430981</b>	
Amount Incurred This Period 2000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
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	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

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

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	2000.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	2000.00
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	2000.00