PAGE 1 / 4

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Moving Hawaii Forward 600 Pennsylvania Ave SE ADDRESS (number and street) Suite 210 (Check if address is changed) Washington 20003 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS zamore@capcompliance.com (Check if address is changed) Optional Second E-Mail Address coleman@capcompliance.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2013 C00540013 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Judith Zamore Type or Print Name of Treasurer Judith Zamore [Electronically Filed] 04 2013 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

	FFC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	i aye Z
Can	didate	Committee:	
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Con information below.)	nplete the candidate
Nam Cand	e of didate		
	didate / Affiliati	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a:
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	raising Representative:	
(g)	X	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, at least one of which is an authorized committee of a federal candidate.	•
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	
	Com	mittees Participating in Joint Fundraiser	
	1.	FRIENDS OF MAZIE HIRONO FEC ID number C COO	0420760
	2.	Pineapple PAC FEC ID number C Coo	0539601
	3.	FEC ID number	
	4.		

FEC Form 1 (Revise	ed 02/2009)	Page 3
Write or Type Committee Na		. ago c
Moving Hawai		
	d Organization, Affiliated Committee, Joint Fundraising Representative,	or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connec	cted Organization Affiliated Committee Joint Fundraising Representat	tive Leadership PAC Sponsor
7. Custodian of Records: lo books and records.	dentify by name, address (phone number optional) and position of the pe	erson in possession of committee
Judith Z	Zamore	
Full Name	₁ 600 Pennsylvania Ave SE	
Mailing Address		
	Washington , DC	20003
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	
8. Treasurer: List the name any designated agent (e.g	and address (phone number optional) of the treasurer of the committee; ., assistant treasurer).	and the name and address of
Full Name Judith Z	Zamore Camore	1
of Treasurer	600 Pennsylvania Ave SE	
Mailing Address	[55, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5,	
	. Weaking a	
	Washington	20003
Title or Position , Treasurer	CITY STATE	ZIP CODE
Treasurer	Telephone number	

	m 1 (Revised 02/2009)	Page 4
Full Name of Designated	Kimberly Coleman	
Agent Mailing Address	600 Pennsylvania Ave SE	
	Suite 210	
	Washington DC2000	
Title or Position Assistant Treas	CITY STATE surer Telephone number	ZIP CODE
Banks or Other safety deposit bo Name of Bank, I	r Depositories: List all banks or other depositories in which the committee deposits funds, hoxes or maintains funds. Depository, etc.	nolds accounts, rents
	PNC Bank	
Mailing Address	650 Pennsylvania Ave SE	
Mailing Address		03
Mailing Address	Washington DC 2000	
	Washington DC 2000 CITY STATE	D3 ZIP CODE
	Washington DC 2000 CITY STATE	
Mailing Address Name of Bank, I	Washington CITY STATE Depository, etc.	
Name of Bank, [Washington CITY STATE Depository, etc.	
Name of Bank, [Washington CITY STATE Depository, etc.	