

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Democratic Party of Hawaii

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		18587.52
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	598.21									
(c) Total Receipts (from Line 19)	159780.75	239419.76								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	160378.96	258007.28								
7. Total Disbursements (from Line 31)	154692.84	252321.16								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	5686.12	5686.12								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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**

Write or Type Committee Name
Democratic Party of Hawaii

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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	8300.00	21100.00
(i) Itemized (use Schedule A)	13505.00	17111.98
(ii) Unitemized	21805.00	38211.98
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	6000.00	11000.00
(c) Other Political Committees (such as PACs)	27805.00	49211.98
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	6262.86	11449.42
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)	80373.50	81889.50
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.75	9398.22
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	45338.64	82470.64
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	45338.64	82470.64
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	159780.75	239419.76
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	114442.11	156949.12

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	20103.63	39754.13
(ii) Non-Federal Share.....	50769.87	113507.23
(b) Other Federal Operating Expenditures.....	83369.34	92609.80
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	154242.84	245871.16
22. Transfers to Affiliated/Other Party Committees.....	450.00	450.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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	6000.00
(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	6000.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	154692.84	252321.16
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	103922.97	138813.93

DETAILED SUMMARY PAGE
of Disbursements

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)	27805.00	49211.98
34. Total Contribution Refunds (from Line 28(d))	0.00	6000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	27805.00	43211.98
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	103472.97	132363.93
37. Offsets to Operating Expenditures (from Line 15, page 3)	80373.50	81889.50
38. Net Operating Expenditures (subtract Line 37 from Line 36)	23099.47	50474.43

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 101
	<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)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial)
Ernest Costa

Mailing Address 252 Kihapai St.

City State Zip Code
Kailua HI 96734

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

Name of Employer Occupation
Self-employed Sound Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
05 / 12 / 2006

Transaction ID: SA11A1.16802

Amount of Each Receipt this Period
300.00

Donation - GFR

B. Full Name (Last, First, Middle Initial)
Democratic National Committee

Mailing Address 430 South Capitol St. SE

City State Zip Code
Washington DC 20003

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
.00

Date of Receipt
06 / 30 / 2006

Transaction ID: SA11A1.17481

Amount of Each Receipt this Period
7462.25

HI Party Victory Fund Uni-temized

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Thomas A Dickey

Mailing Address 2929 Ala Ilima St Apt 301

City State Zip Code
Honolulu HI 96818

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

Name of Employer Occupation
Us Army Federal Civil Service

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
05 / 04 / 2006

Transaction ID: SA11A1.16607

Amount of Each Receipt this Period
25.00

Donation-GLBT

SUBTOTAL of Receipts This Page (optional) ▶ **325.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 101
	<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	

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial)
Erika-Ann Enomoto-Tanuvasa

Mailing Address P.O. Box 22819

City State Zip Code
Honolulu HI 96823

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

Name of Employer Occupation
Hawaiya Technologies LLC Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.16803

Amount of Each Receipt this Period
500.00

Donation - GFR

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

Mailing Address 248 Driftwood Rd.

City State Zip Code
Corona Del Mar CA 92625

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

Name of Employer Occupation
HGK Asset Management Financial Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 0 6

Transaction ID: SA11A1.17568

Amount of Each Receipt this Period
1000.00

Donation

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

Mailing Address 1259 Ala Amoamo St.

City State Zip Code
Honolulu HI 96818

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

Name of Employer Occupation
Office of Senator Ed Case Administrative Assistant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.17249

Amount of Each Receipt this Period
150.00

Donation-GFR

SUBTOTAL of Receipts This Page (optional)	▶	1650.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 101
	<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

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial)
CHARLES E GOFF

Mailing Address PO BOX 44502

City State Zip Code
KAMUELA HI 96743

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

Name of Employer Occupation
STATE OF CALIFORNIA Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ .00

Date of Receipt
MM / DD / YYYY
05 / 04 / 2006

Transaction ID: SA11A1.17480

Amount of Each Receipt this Period
237.50

HI Party Victory Fund

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Mchael Jay Green

Mailing Address 345 Queen St.
2d Floor

City State Zip Code
Honolulu HI 96813

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

Name of Employer Occupation
Self-employed Attorney

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
MM / DD / YYYY
05 / 30 / 2006

Transaction ID: SA11A1.17245

Amount of Each Receipt this Period
1000.00

Donation

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

Mailing Address 99-437 Ulune St.

City State Zip Code
Aiea HI 96701

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

Name of Employer Occupation
City & County of Honolulu Mayor

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
MM / DD / YYYY
05 / 19 / 2006

Transaction ID: SA11A1.16686

Amount of Each Receipt this Period
1000.00

Donation

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 101
	<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

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial)
EVAN C HOOGS

Mailing Address 2215 Aloha Dr Apt 300

City Honolulu State HI Zip Code 96815

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

Name of Employer Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt
04 / 25 / 2006

Transaction ID: SA11A1.17476

Amount of Each Receipt this Period
95.00

HI Party Victory Fund

[MEMO ITEM]

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

Mailing Address 1080 S. Beretania St. #504

City Honolulu State HI Zip Code 96814

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

Name of Employer Occupation Lawyer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt
04 / 05 / 2006

Transaction ID: SA11A1.17478

Amount of Each Receipt this Period
237.50

HI Party Victory Fund

[MEMO ITEM]

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

Mailing Address 857 Hokulani St.

City Honolulu State HI Zip Code 96825

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

Name of Employer Occupation Realtor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
05 / 11 / 2006

Transaction ID: SA11A1.16669

Amount of Each Receipt this Period
500.00

Donation

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 101
	<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

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial)
JOhn Kim

Mailing Address 857 Hokulani St.

City Honolulu State HI Zip Code 96825

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

Name of Employer Pending Occupation Pending

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.16814

Amount of Each Receipt this Period
 300.00

Donation-GFR

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

Mailing Address 3657 Waaloa Way

City Honolulu State HI Zip Code 96822

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

Name of Employer City & County of Honolulu Occupation City Councilmember

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.16842

Amount of Each Receipt this Period
 350.00

Donation - GFR

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

Mailing Address P.O. Box 17021

City Honolulu State HI Zip Code 96817

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

Name of Employer State of Hawaii Occupation Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 1 6 / 2 0 0 6

Transaction ID: SA11A1.16931

Amount of Each Receipt this Period
 200.00

Donation - GFR

SUBTOTAL of Receipts This Page (optional)	▶	850.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 101
	<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

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial) Bong Ho Lee Mailing Address 869 Ahua St. City Honolulu State HI Zip Code 96819 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6 Transaction ID: SA11A1.16934 Amount of Each Receipt this Period 200.00 Donation - GFR
Name of Employer Victor Auto Body Occupation Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		

B. Full Name (Last, First, Middle Initial) Watters Martin Mailing Address 71-D Country Club Rd. City Honolulu State HI Zip Code 96817 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6 Transaction ID: SA11A1.16687 Amount of Each Receipt this Period 1000.00 Donation
Name of Employer Self-employed Occupation Realtor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		

C. Full Name (Last, First, Middle Initial) Michael McCartney Mailing Address 1054 Auloa Rd. City Kailua State HI Zip Code 96734 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6 Transaction ID: SA11A1.17156 Amount of Each Receipt this Period 180.00 Donation
Name of Employer Hawaii Public Television Occupation Executive Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 377.00		

SUBTOTAL of Receipts This Page (optional)	1380.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 101
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial)
Alan Ogawa

Mailing Address 45-625 Hukaekae Pl.

City Kaneohe State HI Zip Code 96744

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

Name of Employer Pending Occupation Pending

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
580.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 1 6 / 2 0 0 6

Transaction ID: SA11A1.16681

Amount of Each Receipt this Period
100.00

Donation

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

Mailing Address 2315-C California Ave.

City Wahiawa State HI Zip Code 96786

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

Name of Employer State of Hawaii Occupation Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
323.85

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 0 6

Transaction ID: SA11A1.17291

Amount of Each Receipt this Period
50.00

Donation - GFR

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

Mailing Address 580 Lunalilo HOme Rd.
#313

City Honolulu State HI Zip Code 96825

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

Name of Employer Customized Promotions Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.16901

Amount of Each Receipt this Period
350.00

Donation - GFR

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 101
	<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	

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial)
Douglas Pyle

Mailing Address 55 S. Kukui St.
#606

City Honolulu State HI Zip Code 96813

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

Name of Employer Pending Occupation Pending

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
05 / 04 / 2006

Transaction ID: SA11A1.16614

Amount of Each Receipt this Period
15.00

Donation-GLBT

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

Mailing Address 1305 Makiki St.
#708

City Honolulu State HI Zip Code 96822

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

Name of Employer U.S. Government Occupation Adm. Assistant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
MM / DD / YYYY
06 / 01 / 2006

Transaction ID: SA11A1.17292

Amount of Each Receipt this Period
700.00

Donation-GFR

C. Full Name (Last, First, Middle Initial)
Ms. Eileen Shea

Mailing Address 4458 Sierra Drive

City Honolulu State HI Zip Code 96816

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

Name of Employer East West Center Occupation Environmental Scientist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
.00

Date of Receipt
MM / DD / YYYY
05 / 16 / 2006

Transaction ID: SA11A1.17475

Amount of Each Receipt this Period
475.00

HI Party Victory Fund

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ **715.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 101
	<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)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial)
John Steelquist

Mailing Address 4054 Tantalus Dr.

City Honolulu State HI Zip Code 96822

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

Name of Employer None Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt
05 / 12 / 2006

Transaction ID: SA11A1.16911

Amount of Each Receipt this Period
150.00

Donation - GFR

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

Mailing Address 98-427 Puaalii St.

City Aiea State HI Zip Code 96701

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

Name of Employer State of Hawaii Occupation Administrator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt
05 / 26 / 2006

Transaction ID: SA11A1.17155

Amount of Each Receipt this Period
180.00

Donation

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

Mailing Address 163 Nenu Ave.

City Honolulu State HI Zip Code 96821

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
05 / 04 / 2006

Transaction ID: SA11A1.16621

Amount of Each Receipt this Period
25.00

Donation-GLBT

SUBTOTAL of Receipts This Page (optional) ▶ 355.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 15 / 101	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial)
Carolyn Wilcox

Mailing Address 920 Ward Ave.
#9-B

City Honolulu State HI Zip Code 96814

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

Name of Employer State of Hawaii Occupation Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	4	/	2	0	0	6

Transaction ID: SA11A1.16622

Amount of Each Receipt this Period
25.00

Donation-GLBT

SUBTOTAL of Receipts This Page (optional)	▶	25.00
TOTAL This Period (last page this line number only)	▶	8300.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 / 101
	(check only one)	
<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

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Full Name (Last, First, Middle Initial) A. Akaka in 2006		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address P.O. Box 3169		Transaction ID: SA11C.17001	
City State Zip Code Honolulu HI 96802	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C	Donation		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2900.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. CASE FOR SENATE		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 1001 BISHOP ST ASB TOWER SUITE 2200		Transaction ID: SA11C.17000	
City State Zip Code HONOLULU HI 96813	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C C00419150	Donation		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Daniel K. Inouye in 2004		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 1088 Bishop St. #1009		Transaction ID: SA11C.17002	
City State Zip Code Honolulu HI 96813	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C	Donation		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	6000.00
TOTAL This Period (last page this line number only) ▶	6000.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 17 / 101
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial)
Democratic Nat'l Committee

Mailing Address 430 S. Capitol St. Se

City State Zip Code
Washington DC 20003

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11449.42

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	2	/	2	0	0	6

Transaction ID: SA12.16982

Amount of Each Receipt this Period
6262.86

Victory Fund

SUBTOTAL of Receipts This Page (optional)	▶	6262.86
TOTAL This Period (last page this line number only)	▶	6262.86

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 / 101
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Full Name (Last, First, Middle Initial) A. Abercrombie for Congress		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 1357 Kapiolani Blvd. Suite 1005		Transaction ID: SA15.16070
City Honolulu	State HI	Amount of Each Receipt this Period 450.00
Zip Code 96814	FEC ID number of contributing federal political committee. C	Convention Display Table Rental
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) B. Akaka in 2006		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address P.O. Box 3169		Transaction ID: SA15.16072
City Honolulu	State HI	Amount of Each Receipt this Period 900.00
Zip Code 96802	FEC ID number of contributing federal political committee. C	Conv. Display Table Rental
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

Full Name (Last, First, Middle Initial) C. Guy Archer		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 0 / 2 0 0 6
Mailing Address 2499 Kapiolani Ave. #3405		Transaction ID: SA15.16693
City Honolulu	State HI	Amount of Each Receipt this Period 10.00
Zip Code 96826	FEC ID number of contributing federal political committee. C	State Conv. Reg. Fees
Name of Employer Outdoor Circle	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional)	▶	1360.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 / 101
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Full Name (Last, First, Middle Initial) A. Michael Augusta		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 803 Isenberg St. #403-A		Transaction ID: SA15.16966	
City Honolulu	State HI	Amount of Each Receipt this Period 240.00	
Zip Code 96826		State Conv. Reg. Fees	
FEC ID number of contributing federal political committee. C			
Name of Employer Pending	Occupation Pending		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Iris Catalani		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 47-638 Hui Ulii St.		Transaction ID: SA15.16983	
City Kaneohe	State HI	Amount of Each Receipt this Period 205.00	
Zip Code 96744		State Conv. Reg. Fees	
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00		

Full Name (Last, First, Middle Initial) C. Lillian Ching		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 45-1014 Paaila Pl.		Transaction ID: SA15.16985	
City Kaneohe	State HI	Amount of Each Receipt this Period 95.00	
Zip Code 96744		State Conv. Reg. Fees	
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		

SUBTOTAL of Receipts This Page (optional) ▶	540.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 101
	<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	

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Full Name (Last, First, Middle Initial) A. Edward Clayton		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 459 Kailua Rd.		Transaction ID: SA15.16210	
City State Zip Code Kailua HI 96734	Amount of Each Receipt this Period 180.00		
FEC ID number of contributing federal political committee. C	State Conv. Reg. Fees		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 360.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Colleen for Congress		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 1157 FORT STREET MALL		Transaction ID: SA15.16986	
City State Zip Code HONOLULU HI 96813	Amount of Each Receipt this Period 450.00		
FEC ID number of contributing federal political committee. C C00382663	Conv. Display Table Rental		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 450.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. County of Hawaii Democratic Party		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address P.O. Box 1614		Transaction ID: SA15.16989	
City State Zip Code Hilo HI 96720	Amount of Each Receipt this Period 1456.50		
FEC ID number of contributing federal political committee. C	Reimb. Purchase of T-shirts		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1456.50		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	2086.50
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 / 101
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial)
Filipino Community Center, Inc.

Mailing Address 94-428 Mokuloa St.
Suite 302

City State Zip Code
Waipahu HI 96797

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 0 / 2 0 0 6

Transaction ID: SA15.17326

Amount of Each Receipt this Period
250.00

Return of Security Dep-Fa-
cility Rental

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

Mailing Address 86-363 Kawili St.

City State Zip Code
Waianae HI 96792

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

Name of Employer Occupation
None Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 0 6

Transaction ID: SA15.16250

Amount of Each Receipt this Period
125.00

State Conv. Reg. Fees

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

Mailing Address 1638-A Mikahala Way

City State Zip Code
Honolulu HI 96816

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

Name of Employer Occupation
None Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 0 6

Transaction ID: SA15.16715

Amount of Each Receipt this Period
110.00

State Conv. Reg. Fees

SUBTOTAL of Receipts This Page (optional)	▶	485.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 / 101
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial) FRIENDS OF MAZIE HIRONO		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address PO BOX 677		Transaction ID: SA15.16082	
City HONOLULU	State HI	Amount of Each Receipt this Period 300.00	
Zip Code 96809		Conv. Display Table Rental	
FEC ID number of contributing federal political committee. C C00420760			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

B. Full Name (Last, First, Middle Initial) Ford Fuchigami		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 1259 Ala Amoamo St.		Transaction ID: SA15.16084	
City Honolulu	State HI	Amount of Each Receipt this Period 450.00	
Zip Code 96818		Conv. Display Table Rental	
FEC ID number of contributing federal political committee. C			
Name of Employer Office of Senator Ed Case	Occupation Administrative Assistant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

C. Full Name (Last, First, Middle Initial) Carol Fukunaga		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 0 / 2 0 0 6	
Mailing Address 1571 Piikoi St. #402		Transaction ID: SA15.16703	
City Honolulu	State HI	Amount of Each Receipt this Period 110.00	
Zip Code 96822		State Conv. Reg. Fees	
FEC ID number of contributing federal political committee. C			
Name of Employer State of Hawaii	Occupation State Senator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		

SUBTOTAL of Receipts This Page (optional) ▶	860.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 23 / 101
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial)
Joann Gaines

Mailing Address 3594 Akaka Pl.

City Honolulu State HI Zip Code 96822

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

Name of Employer Self-Employed Occupation COnsultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	0	/	2	0	0	6

Transaction ID: SA15.17218

Amount of Each Receipt this Period
215.00

State Conv. Reg. Fees

B. Full Name (Last, First, Middle Initial)
GARY HOOSER FOR CONGRESS

Mailing Address PO BOX 1568

City LIHUE State HI Zip Code 96766

FEC ID number of contributing federal political committee. **C** C00420737

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	4	/	2	0	0	6

Transaction ID: SA15.17004

Amount of Each Receipt this Period
300.00

Conv. Display Table Rental

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

Mailing Address 92-954 Makakilo Dr.
#71

City Makakilo State HI Zip Code 96707

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

Name of Employer Pending Occupation Pending

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	5	/	2	0	0	6

Transaction ID: SA15.15950

Amount of Each Receipt this Period
285.00

State Convention Reg. Fees

SUBTOTAL of Receipts This Page (optional)	▶	800.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 101
	<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	

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial)
Carolyn Golojuch

Mailing Address 92-954 Makakilo Dr.
#71

City Makakilo State HI Zip Code 96707

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

Name of Employer Pending Occupation Pending

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
465.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 4 / 2 0 0 6

Transaction ID: SA15.17008

Amount of Each Receipt this Period
180.00

State Convention Reg. Fees

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

Mailing Address 1157 Fort Street Mall

City Honolulu State HI Zip Code 96813

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

Name of Employer Self-Employed Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 0 6

Transaction ID: SA15.16283

Amount of Each Receipt this Period
130.00

State Conv. Reg. Fees

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

Mailing Address 250 N. Judd St.

City Honolulu State HI Zip Code 96817

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

Name of Employer State of Hawaii Occupation Administration

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 4 / 2 0 0 6

Transaction ID: SA15.17015

Amount of Each Receipt this Period
140.00

State Conv. Reg. Fees

SUBTOTAL of Receipts This Page (optional)	▶	450.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 25 / 101
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Full Name (Last, First, Middle Initial) A. Hawaiian Issues Caucus		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 1314 S. King St. #G-4		Transaction ID: SA15.17116
City Honolulu State HI Zip Code 96814	Amount of Each Receipt this Period 280.00	
FEC ID number of contributing federal political committee. C		Conv. Display Table Rental
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

Full Name (Last, First, Middle Initial) B. HGEA/AFSCME		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address P.O. Box 2930		Transaction ID: SA15.17020
City Honolulu State HI Zip Code 96802	Amount of Each Receipt this Period 700.00	
FEC ID number of contributing federal political committee. C		State Conv. Reg. Fees
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

Full Name (Last, First, Middle Initial) C. Lance Holter		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6
Mailing Address Box 790656		Transaction ID: SA15.16299
City Paia State HI Zip Code 96779	Amount of Each Receipt this Period 140.00	
FEC ID number of contributing federal political committee. C		State Conv. Reg. Fees
Name of Employer Self-employed	Occupation Realtor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

SUBTOTAL of Receipts This Page (optional) ▶	1120.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 26 / 101
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Full Name (Last, First, Middle Initial) Local 142 ILWU Mailing Address 451 Atkinson Dr.		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 6 Transaction ID: SA15.16039
City State Zip Code Honolulu HI 96814	Amount of Each Receipt this Period 2415.00	
FEC ID number of contributing federal political committee. C	State Convention Reg. Fees	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2415.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) Local 142 ILWU Mailing Address 451 Atkinson Dr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6 Transaction ID: SA15.16119
City State Zip Code Honolulu HI 96814	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C	State Conv. Reg. Fees	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) Local 142 ILWU Mailing Address 451 Atkinson Dr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 0 / 2 0 0 6 Transaction ID: SA15.16735
City State Zip Code Honolulu HI 96814	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C	State Conv. Reg. Fees	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2800.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	2800.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 101
	<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	

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Full Name (Last, First, Middle Initial) A. Union Iron Workers		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6
Mailing Address 94-497 Ukee St		Transaction ID: SA15.16310
City State Zip Code Waipahi HI 96797	Amount of Each Receipt this Period 1300.00	
FEC ID number of contributing federal political committee. C	State Conv. Reg. Fees	
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 1300.00		

Full Name (Last, First, Middle Initial) B. Jan Iwase		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6
Mailing Address 95-711 Lewanuu St.		Transaction ID: SA15.16313
City State Zip Code Mililani HI 96789	Amount of Each Receipt this Period 230.00	
FEC ID number of contributing federal political committee. C	State Conv. Reg. Fees	
Name of Employer Occupation State of Hawaii Teacher	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 230.00		

Full Name (Last, First, Middle Initial) C. Iwase for Governor		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address P.O. Box 37053		Transaction ID: SA15.16120
City State Zip Code Honolulu HI 96837	Amount of Each Receipt this Period 450.00	
FEC ID number of contributing federal political committee. C	Convention Display Table Rental	
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 450.00		

SUBTOTAL of Receipts This Page (optional) ▶	1980.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 28 / 101
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial)
JOE ZUIKER FOR CONGRESS

Mailing Address PO BOX 116

City State Zip Code
HONOLULU HI 46813

FEC ID number of contributing federal political committee. **C** C00422626

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 4 / 2 0 0 6

Transaction ID: SA15.17026

Amount of Each Receipt this Period
300.00

Conv. Display Table Rental

B. Full Name (Last, First, Middle Initial)
Florence Kong Kee

Mailing Address 844 Hoomaoana St.

City State Zip Code
Pearl City HI 96782

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 2 / 2 0 0 6

Transaction ID: SA15.16365

Amount of Each Receipt this Period
65.00

State Conv. Reg. Fees

C. Full Name (Last, First, Middle Initial)
Florence Kong Kee

Mailing Address 844 Hoomaoana St.

City State Zip Code
Pearl City HI 96782

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 0 1 / 2 0 0 6

Transaction ID: SA15.17313

Amount of Each Receipt this Period
50.00

Hdqt. Parking Pass

SUBTOTAL of Receipts This Page (optional) ► **415.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 101
	<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	

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Full Name (Last, First, Middle Initial) A. Randall Kusaka		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6
Mailing Address 1294B Maunalualani Ct.		Transaction ID: SA15.16373
City State Zip Code Honolulu HI 96819	Amount of Each Receipt this Period 85.00	
FEC ID number of contributing federal political committee. C		State Conv. Reg. Fees
Name of Employer Hawaii Government Employees Assoc.	Occupation Communications Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	

Full Name (Last, First, Middle Initial) B. Martin Luna		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address 275 Ekoa Pl.		Transaction ID: SA15.17042
City State Zip Code Wailuku HI 96793	Amount of Each Receipt this Period 160.00	
FEC ID number of contributing federal political committee. C		State Conv. Reg. Fees
Name of Employer Carlsmith Ball LLP	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. Matt Matsunaga		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 47-500A Waipaipai St.		Transaction ID: SA15.16132
City State Zip Code Kaneohe HI 96744	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		Convention Display Table Rental
Name of Employer Schlack Ito Lockwood & El-kind	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	545.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 101
	<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	

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Full Name (Last, First, Middle Initial) A. Matt Matsunaga		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 47-500A Waipaipai St.		Transaction ID: SA15.17046	
City State Zip Code Kaneohe HI 96744		Amount of Each Receipt this Period 180.00	
FEC ID number of contributing federal political committee. C		State Conv. Reg. Fees	
Name of Employer Occupation Schlack Ito Lockwood & El-kind Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 480.00	

Full Name (Last, First, Middle Initial) B. McNeil Wilson Communications		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 1001 Bishop St. Pauahi Tower Suite 950		Transaction ID: SA15.17050	
City State Zip Code Honolulu HI 96813		Amount of Each Receipt this Period 215.00	
FEC ID number of contributing federal political committee. C		State Conv. Reg. Fees	
Name of Employer Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 215.00	

Full Name (Last, First, Middle Initial) C. McNeil Wilson Communications		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 3 / 2 0 0 6	
Mailing Address 1001 Bishop St. Pauahi Tower Suite 950		Transaction ID: SA15.17319	
City State Zip Code Honolulu HI 96813		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		State Conv. Reg. Fees	
Name of Employer Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional) ▶	420.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 101
	<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 checked="" type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Full Name (Last, First, Middle Initial) A. Ron Menor		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address 220S. King St. Ste. 1770		Transaction ID: SA15.16134	
City Honolulu State HI Zip Code 96813	Amount of Each Receipt this Period 450.00		
FEC ID number of contributing federal political committee. C		Convention Display Table Rental	
Name of Employer State of Hawaii	Occupation Legislator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) B. Elizabeth Nakamoto		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 5258 Alahee St.		Transaction ID: SA15.16436	
City Honolulu State HI Zip Code 96821	Amount of Each Receipt this Period 110.00		
FEC ID number of contributing federal political committee. C		State Conv. Reg. Fees	
Name of Employer Pending	Occupation Pending		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		

Full Name (Last, First, Middle Initial) C. New Horizon Entertainment LLC		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address P.O. Box 50680		Transaction ID: SA15.17058	
City Idaho Falls State ID Zip Code 83405	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C		Conv. Display Table Rental	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	860.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 32 / 101
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Full Name (Last, First, Middle Initial) A. Lauzanne Oshiro		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 2315-C California Ave.		Transaction ID: SA15.17258
City State Zip Code Wahiawa HI 96786	Amount of Each Receipt this Period 70.00	
FEC ID number of contributing federal political committee. C	State Conv. Reg. Fees	
Name of Employer Occupation State of Hawaii Teacher	Aggregate Year-to-Date ▼ 273.85	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Debbie Passmore		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address P.O. Box 1483		Transaction ID: SA15.16138
City State Zip Code Aiea HI 96701	Amount of Each Receipt this Period 410.00	
FEC ID number of contributing federal political committee. C	State Convention Reg. Fees	
Name of Employer Occupation Pending Pending	Aggregate Year-to-Date ▼ 410.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Marion Poirer		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 6
Mailing Address 95-584 Naholoholo St.		Transaction ID: SA15.16005
City State Zip Code Mililani HI 96789	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	State Convention Reg. Fees	
Name of Employer Occupation Self-employed Accountant	Aggregate Year-to-Date ▼ 260.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	730.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 33 / 101
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Full Name (Last, First, Middle Initial) A. Charles Prentiss		Date of Receipt M M / D D / Y Y Y Y 04 / 17 / 2006	
Mailing Address 519 Wainao Rd.		Transaction ID: SA15.16007	
City Kailua	State HI	Amount of Each Receipt this Period 10.00	
Zip Code 96734		State Convention Reg. Fees	
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) B. Charles Prentiss		Date of Receipt M M / D D / Y Y Y Y 05 / 02 / 2006	
Mailing Address 519 Wainao Rd.		Transaction ID: SA15.16479	
City Kailua	State HI	Amount of Each Receipt this Period 100.00	
Zip Code 96734		State Conv. Reg. Fees	
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 310.00	

Full Name (Last, First, Middle Initial) C. Douglas Pyle		Date of Receipt M M / D D / Y Y Y Y 05 / 02 / 2006	
Mailing Address 55 S. Kukui St. #606		Transaction ID: SA15.16482	
City Honolulu	State HI	Amount of Each Receipt this Period 110.00	
Zip Code 96813		State Conv. Reg. Fees	
FEC ID number of contributing federal political committee. C			
Name of Employer Pending		Occupation Pending	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional)	220.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 101
	<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	

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Full Name (Last, First, Middle Initial) A. Douglas Pyle		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 55 S. Kukui St. #606		Transaction ID: SA15.16654	
City Honolulu State HI Zip Code 96813	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C		State Conv. Reg. Fees	
Name of Employer Pending	Occupation Pending		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00		

Full Name (Last, First, Middle Initial) B. Ellen Ryan		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 6	
Mailing Address 1206 Ulunahale St.		Transaction ID: SA15.15932	
City Kailua State HI Zip Code 96734	Amount of Each Receipt this Period 145.00		
FEC ID number of contributing federal political committee. C		State Convention Reg. Fees	
Name of Employer Self-Employed	Occupation Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

Full Name (Last, First, Middle Initial) C. Ellen Ryan		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 1206 Ulunahale St.		Transaction ID: SA15.16656	
City Kailua State HI Zip Code 96734	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		State Conv. Reg. Fees	
Name of Employer Self-Employed	Occupation Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00		

SUBTOTAL of Receipts This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 35 / 101
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial) Ellen Ryan		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6	
Mailing Address 1206 Ulunahale St.		Transaction ID: SA15.16672	
City Kailua	State HI	Amount of Each Receipt this Period 50.00	
Zip Code 96734		Hdqt. Parking Payment	
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed	Occupation Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00		

B. Full Name (Last, First, Middle Initial) Ellen Ryan		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 1206 Ulunahale St.		Transaction ID: SA15.17263	
City Kailua	State HI	Amount of Each Receipt this Period 35.00	
Zip Code 96734		State Conv. Reg. Fees	
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed	Occupation Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00		

C. Full Name (Last, First, Middle Initial) Ellen Ryan		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6	
Mailing Address 1206 Ulunahale St.		Transaction ID: SA15.17295	
City Kailua	State HI	Amount of Each Receipt this Period 50.00	
Zip Code 96734		Hdqt. PARKing Pass	
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed	Occupation Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 560.00		

SUBTOTAL of Receipts This Page (optional) ▶	135.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 101
	<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	

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Full Name (Last, First, Middle Initial) A. Michael Sacharski		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 666 Kaumakani St.		Transaction ID: SA15.17077	
City Honolulu	State HI	Amount of Each Receipt this Period 300.00	
Zip Code 96825		Conv. Display Table Rental	
FEC ID number of contributing federal political committee. C			
Name of Employer Pending	Occupation Pending		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Mildred Saito		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 0 / 2 0 0 6	
Mailing Address 1588 Alewa Dr.		Transaction ID: SA15.16946	
City Honolulu	State HI	Amount of Each Receipt this Period 10.00	
Zip Code 96817		State Conv. Reg. Fees	
FEC ID number of contributing federal political committee. C			
Name of Employer None	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) C. Sheet Metal Workers' Int'l Assoc. PAC		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 6	
Mailing Address 1750 New York Avenue N.W.		Transaction ID: SA15.17303	
City Washington	State DC	Amount of Each Receipt this Period 5000.00	
Zip Code 20006		Donation	
FEC ID number of contributing federal political committee. C C70001136			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00		

SUBTOTAL of Receipts This Page (optional) ▶	5310.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 37 / 101
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Full Name (Last, First, Middle Initial) A. Steve Sparks		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 13-1255 Malama St.		Transaction ID: SA15.16523	
City Pahoia	State HI	Zip Code 96778	Amount of Each Receipt this Period 55.00
FEC ID number of contributing federal political committee. C		State Conv. Reg. Fees	
Name of Employer Pending	Occupation Pending		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00		

Full Name (Last, First, Middle Initial) B. Clay Springer		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 1760 Akaakoa St.		Transaction ID: SA15.17081	
City Kailua	State HI	Zip Code 96734	Amount of Each Receipt this Period 32.00
FEC ID number of contributing federal political committee. C		Conv. Display Table Rental	
Name of Employer HMSA	Occupation Project Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 232.00		

Full Name (Last, First, Middle Initial) C. Clay Springer		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 1760 Akaakoa St.		Transaction ID: SA15.17082	
City Kailua	State HI	Zip Code 96734	Amount of Each Receipt this Period 415.00
FEC ID number of contributing federal political committee. C		State Conv. Reg. Fees	
Name of Employer HMSA	Occupation Project Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 647.00		

SUBTOTAL of Receipts This Page (optional) ▶	502.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 38 / 101
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Full Name (Last, First, Middle Initial) A. Clay Springer		Date of Receipt M M / D D / Y Y Y Y 06 / 01 / 2006	
Mailing Address 1760 Akaakoa St.		Transaction ID: SA15.17296	
City Kailua	State HI	Amount of Each Receipt this Period 50.00	
Zip Code 96734		Hdqt. Parking Pass	
FEC ID number of contributing federal political committee. C			
Name of Employer HMSA	Occupation Project Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 697.00		

Full Name (Last, First, Middle Initial) B. Clay Springer		Date of Receipt M M / D D / Y Y Y Y 06 / 01 / 2006	
Mailing Address 1760 Akaakoa St.		Transaction ID: SA15.17315	
City Kailua	State HI	Amount of Each Receipt this Period 50.00	
Zip Code 96734		Hdqt. Parking Pass	
FEC ID number of contributing federal political committee. C			
Name of Employer HMSA	Occupation Project Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 747.00		

Full Name (Last, First, Middle Initial) C. Clay Springer		Date of Receipt M M / D D / Y Y Y Y 06 / 07 / 2006	
Mailing Address 1760 Akaakoa St.		Transaction ID: SA15.17318	
City Kailua	State HI	Amount of Each Receipt this Period 100.00	
Zip Code 96734		Hdqt. Parking Pass	
FEC ID number of contributing federal political committee. C			
Name of Employer HMSA	Occupation Project Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 847.00		

SUBTOTAL of Receipts This Page (optional)	200.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 101
	<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	

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Full Name (Last, First, Middle Initial) A. John Steelquist		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 4054 Tantalus Dr.		Transaction ID: SA15.16533	
City Honolulu State HI Zip Code 96822	Amount of Each Receipt this Period 230.00		
FEC ID number of contributing federal political committee. C	State Conv. Reg. Fees		
Name of Employer None Occupation Retired	Receipt For:		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00		

Full Name (Last, First, Middle Initial) B. John Steelquist		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 0 / 2 0 0 6	
Mailing Address 4054 Tantalus Dr.		Transaction ID: SA15.16716	
City Honolulu State HI Zip Code 96822	Amount of Each Receipt this Period 230.00		
FEC ID number of contributing federal political committee. C	State Conv. Reg. Fees		
Name of Employer None Occupation Retired	Receipt For:		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 610.00		

Full Name (Last, First, Middle Initial) C. Elaine Toguchi		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 47-640 Hui Ulii St.		Transaction ID: SA15.17088	
City Kaneohe State HI Zip Code 96744	Amount of Each Receipt this Period 205.00		
FEC ID number of contributing federal political committee. C	State Conv. Reg. Fees		
Name of Employer Occupation	Receipt For:		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00		

SUBTOTAL of Receipts This Page (optional) ▶	665.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 101
	<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	

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Full Name (Last, First, Middle Initial) A. United Public Workers PAC		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 6	
Mailing Address 1426 School St.		Transaction ID: SA15.15946	
City State Zip Code Honolulu HI 96817	Amount of Each Receipt this Period 400.00		
FEC ID number of contributing federal political committee. C		State Convention Reg. Fees	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) B. United Public Workers PAC		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 1426 School St.		Transaction ID: SA15.16559	
City State Zip Code Honolulu HI 96817	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		State COnv. Reg. Fees	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. United Public Workers PAC		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address 1426 School St.		Transaction ID: SA15.17094	
City State Zip Code Honolulu HI 96817	Amount of Each Receipt this Period 135.00		
FEC ID number of contributing federal political committee. C		State COnv. Reg. Fees	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 635.00		

SUBTOTAL of Receipts This Page (optional) ▶	635.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 101
	<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	

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Full Name (Last, First, Middle Initial) A. United Public Workers PAC		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 1426 School St.		Transaction ID: SA15.17280	
City Honolulu	State HI	Amount of Each Receipt this Period 75.00	
Zip Code 96817		State Conv. Reg. Fees	
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 710.00		

Full Name (Last, First, Middle Initial) B. Clifford Uwaine		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 98-1366 Koahehe Pl. #196		Transaction ID: SA15.16561	
City Pearl City	State HI	Amount of Each Receipt this Period 230.00	
Zip Code 96782		State Conv. Reg. Fees	
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00		

Full Name (Last, First, Middle Initial) C. Carolyn Wilcox		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 920 Ward Ave. #9-B		Transaction ID: SA15.16581	
City Honolulu	State HI	Amount of Each Receipt this Period 100.00	
Zip Code 96814		State Conv. Reg. Fees	
FEC ID number of contributing federal political committee. C			
Name of Employer State of Hawaii	Occupation Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	405.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 42 / 101
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Full Name (Last, First, Middle Initial) A. William J. Aila Governor Committee		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address P.O. Box 1319		Transaction ID: SA15.17098	
City Waianae	State HI	Amount of Each Receipt this Period 450.00	
Zip Code 96792		COnv. Display Table Rental	
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 560.00		

Full Name (Last, First, Middle Initial) B. James Wood		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address P.O. Box 1013		Transaction ID: SA15.17159	
City Kailua	State HI	Amount of Each Receipt this Period 270.00	
Zip Code 96734		State Conv. Reg. Fees	
FEC ID number of contributing federal political committee. C			
Name of Employer Pending	Occupation Pending		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00		

Full Name (Last, First, Middle Initial) C. Justin Woodson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6	
Mailing Address 222 Liliuokalani Ave. #1104		Transaction ID: SA15.16585	
City Honolulu	State HI	Amount of Each Receipt this Period 60.00	
Zip Code 96815		State Conv. Reg. Fees	
FEC ID number of contributing federal political committee. C			
Name of Employer Democratic Party of HI	Occupation Field Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

SUBTOTAL of Receipts This Page (optional) ▶	780.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 43 / 101
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Full Name (Last, First, Middle Initial) A. Justin Woodson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 6
Mailing Address 222 Liliuokalani Ave. #1104		Transaction ID: SA15.16664
City Honolulu State HI Zip Code 96815	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C	State Conv. Reg. Fees	
Name of Employer Democratic Party of HI Occupation Field Manager	Aggregate Year-to-Date ▼ 220.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Justin Woodson		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 222 Liliuokalani Ave. #1104		Transaction ID: SA15.16674
City Honolulu State HI Zip Code 96815	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Hdqt. Parking Payment	
Name of Employer Democratic Party of HI Occupation Field Manager	Aggregate Year-to-Date ▼ 270.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Justin Woodson		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6
Mailing Address 222 Liliuokalani Ave. #1104		Transaction ID: SA15.17316
City Honolulu State HI Zip Code 96815	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Hdqt. Parking Pass	
Name of Employer Democratic Party of HI Occupation Field Manager	Aggregate Year-to-Date ▼ 320.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	110.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 44 / 101
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input checked="" type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Full Name (Last, First, Middle Initial) A. Justin Woodson		Date of Receipt M M / D D / Y Y Y Y 06 / 07 / 2006
Mailing Address 222 Liliuokalani Ave. #1104		Transaction ID: SA15.17317
City Honolulu State HI Zip Code 96815	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Hdqt. Parking Pass
Name of Employer Democratic Party of HI	Occupation Field Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 370.00	

Full Name (Last, First, Middle Initial) B. Joseph Zuiker		Date of Receipt M M / D D / Y Y Y Y 05 / 02 / 2006
Mailing Address 1716 Keeaumoku St. 702		Transaction ID: SA15.16598
City Honolulu State HI Zip Code 96822	Amount of Each Receipt this Period 260.00	
FEC ID number of contributing federal political committee. C		State Conv. Reg. Fees
Name of Employer Self-employed	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

SUBTOTAL of Receipts This Page (optional)	310.00
TOTAL This Period (last page this line number only)	24978.50

**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)

PAGE 45 / 101

<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

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Full Name (Last, First, Middle Initial) A. Akaka in 2006		Transaction ID: SB21B.17665 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6	
Mailing Address P.O. Box 3169		Amount of Each Disbursement this Period 100.00	
City Honolulu State HI Zip Code 96802	Purpose of Disbursement Part RefundConv. Table	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) B. Akyth, Inc.		Transaction ID: SB21B.17693 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6	
Mailing Address 979C Robello Lane		Amount of Each Disbursement this Period 262.98	
City Honolulu State HI Zip Code 96817	Purpose of Disbursement Conv-Volunteer Lunches	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) C. Best Promotions, Inc.		Transaction ID: SB21B.17669 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 6	
Mailing Address 13400 Riverside Dr. #207		Amount of Each Disbursement this Period 1502.50	
City Sherman Oaks State CA Zip Code 91423	Purpose of Disbursement Conv. Tote Bags-1st payment	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	1865.48
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

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Full Name (Last, First, Middle Initial) A. Best Promotions, Inc.		Transaction ID: SB21B.17673 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 13400 Riverside Dr. #207		Amount of Each Disbursement this Period 1502.50
City Sherman Oaks State CA Zip Code 91423	Purpose of Disbursement Conv. Totes-Final Payment Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Andy Bumatai		Transaction ID: SB21B.17684 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 7 / 2 0 0 6
Mailing Address 111 Hekili St. Ste. A		Amount of Each Disbursement this Period 500.00
City Kailua State HI Zip Code 96734	Purpose of Disbursement COnv. Emcee Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. First Hawaiian Bank		Transaction ID: SB21B.17422 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 6
Mailing Address 999 Bishop St. Main Branch		Amount of Each Disbursement this Period 100.00
City Honolulu State HI Zip Code 96813	Purpose of Disbursement Merchant Fee Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	2102.50
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Full Name (Last, First, Middle Initial) A. First Hawaiian Bank		Transaction ID: SB21B.17423 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 999 Bishop St. Main Branch		Amount of Each Disbursement this Period 1.00
City Honolulu State HI Zip Code 96813		
Purpose of Disbursement Merchant Fees		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. First Hawaiian Bank		Transaction ID: SB21B.17424 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6
Mailing Address 999 Bishop St. Main Branch		Amount of Each Disbursement this Period 49.57
City Honolulu State HI Zip Code 96813		
Purpose of Disbursement Merchant Fees		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. First Hawaiian Bank		Transaction ID: SB21B.17426 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 6
Mailing Address 999 Bishop St. Main Branch		Amount of Each Disbursement this Period 90.00
City Honolulu State HI Zip Code 96813		
Purpose of Disbursement Special Handling Charge		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	140.57
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)

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<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

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Fisher Hawaii, Inc. Full Name (Last, First, Middle Initial) Mailing Address 450 Cooke Street City Honolulu State HI Zip Code 96813 Purpose of Disbursement Conv. Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.17672 Date of Disbursement 05 / 17 / 2006 Amount of Each Disbursement this Period 676.91 Category/Type
--	--	--

B. Al Hamai Full Name (Last, First, Middle Initial) Mailing Address 1457 Ala Aolani St. City HOnolulu State HI Zip Code 96818 Purpose of Disbursement Conv. PARliamentarian Serv. Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.17682 Date of Disbursement 05 / 27 / 2006 Amount of Each Disbursement this Period 500.00 Category/Type
---	--	--

C. Hilton Hawaiian Village Full Name (Last, First, Middle Initial) Mailing Address 2005 Kalia Road City Honolulu State HI Zip Code 96815 Purpose of Disbursement COnv. Catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.17675 Date of Disbursement 05 / 22 / 2006 Amount of Each Disbursement this Period 33205.04 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	34381.95
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)

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<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

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Full Name (Last, First, Middle Initial) A. Hilton Hawaiian Village		Transaction ID: SB21B.17696 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6
Mailing Address 2005 Kalia Road		Amount of Each Disbursement this Period 23254.71
City Honolulu State HI Zip Code 96815	Purpose of Disbursement Conv-Facility Rental	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Russell Ho		Transaction ID: SB21B.17683 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 7 / 2 0 0 6
Mailing Address 803 Isenberg Street Apt. #202		Amount of Each Disbursement this Period 350.00
City Honolulu State HI Zip Code 96826	Purpose of Disbursement COnv. Photo. Services	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Local 142 ILWU		Transaction ID: SB21B.17692 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address 451 Atkinson Dr.		Amount of Each Disbursement this Period 210.00
City Honolulu State HI Zip Code 96814	Purpose of Disbursement Refund Conv. Fees	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	23814.71
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)

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<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

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Full Name (Last, First, Middle Initial) A. Renate Kawakami		Transaction ID: SB21B.17371 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 6
Mailing Address 3175 Waiialae Ave. #503		Amount of Each Disbursement this Period 1500.00
City Honolulu State HI Zip Code 96816		
Purpose of Disbursement Grassroots Projects		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Renate Kawakami		Transaction ID: SB21B.17372 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 6
Mailing Address 3175 Waiialae Ave. #503		Amount of Each Disbursement this Period 1500.00
City Honolulu State HI Zip Code 96816		
Purpose of Disbursement Grassroot Projects		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Renate Kawakami		Transaction ID: SB21B.17404 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 6
Mailing Address 3175 Waiialae Ave. #503		Amount of Each Disbursement this Period 1500.00
City Honolulu State HI Zip Code 96816		
Purpose of Disbursement Grassroot Projects		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4500.00
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

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Full Name (Last, First, Middle Initial) A. Renate Kawakami		Transaction ID: SB21B.17405 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 3175 Waialae Ave. #503		Amount of Each Disbursement this Period 1500.00
City Honolulu State HI Zip Code 96816	Purpose of Disbursement Grassroot Projects Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Kinko's Copies		Transaction ID: SB21B.17674 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 1500 Kapiolani Boulevard		Amount of Each Disbursement this Period 500.00
City Honolulu State HI Zip Code 96814	Purpose of Disbursement COnv. Printing-Deposit Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Kinko's Copies		Transaction ID: SB21B.17678 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address 1500 Kapiolani Boulevard		Amount of Each Disbursement this Period 6517.19
City Honolulu State HI Zip Code 96814	Purpose of Disbursement COnv. Printing Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	8517.19
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

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Full Name (Last, First, Middle Initial) A. Kinko's Copies		Transaction ID: SB21B.17685 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 6
Mailing Address 1500 Kapiolani Boulevard		Amount of Each Disbursement this Period 4500.00
City Honolulu State HI Zip Code 96814	Purpose of Disbursement Conv. Printing	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Ocean Air Screenprinting		Transaction ID: SB21B.17670 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 6
Mailing Address 94-356E Waipahu Depot Road		Amount of Each Disbursement this Period 1456.50
City Waipahu State HI Zip Code 96797	Purpose of Disbursement T-shirts-HI County Conv.	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Jana Park-Okuna		Transaction ID: SB21B.17695 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address 94-1078 Mahua Pl.		Amount of Each Disbursement this Period 300.00
City Waipahu State HI Zip Code 96797	Purpose of Disbursement Conv-Sing-lang. Interpreter	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	6256.50
TOTAL This Period (last page this line number only) ▶	81578.90

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)

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<input type="checkbox"/> 21b	<input checked="" 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

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NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Full Name (Last, First, Middle Initial)

A. Assoc./State Dem. Chairs

Mailing Address 430 S. Capitol St.
SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Membership Fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB22.17403

Date of Disbursement

/ /

Amount of Each Disbursement this Period

450.00

SUBTOTAL of Disbursements This Page (optional)

450.00

TOTAL This Period (last page this line number only)

450.00

SCHEDULE H2 (FEC Form 3X) ALLOCATION RATIOS

PAGE 54 / 101

NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.

Methods of allocation :

- I. FUNDRAISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.
For PACs Only : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

<p>ACTIVITY OR EVENT IDENTIFIER Administrative ()</p> <p>ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS: <input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported</p>	<p>FEDERAL % 0.00 %</p>	<p>NONFEDERAL % 100.00 %</p> <p>Transaction ID: H2.16771</p>
<p>ACTIVITY OR EVENT IDENTIFIER Korean Comm. Event (GFR) (05/16/2006)</p> <p>ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input checked="" type="checkbox"/> Same as Previously Reported</p>	<p>FEDERAL % 0.00 %</p>	<p>NONFEDERAL % 100.00 %</p> <p>Transaction ID: H2.17472</p>
<p>ACTIVITY OR EVENT IDENTIFIER Korean Comm. Event (GFR) (05/16/2006)</p> <p>ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> New <input checked="" type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported</p>	<p>FEDERAL % 65.00 %</p>	<p>NONFEDERAL % 35.00 %</p> <p>Transaction ID: H2.17630</p>
<p>ACTIVITY OR EVENT IDENTIFIER Korean Golf Event (GFR) (05/16/2006)</p> <p>ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS: <input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported</p>	<p>FEDERAL % 64.00 %</p>	<p>NONFEDERAL % 36.00 %</p> <p>Transaction ID: H2.16769</p>

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Democratic Party of Hawaii

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Demo. Party of HI State #2	M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 6	16678.35

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative		10954.36	Transaction ID: H3.17325
ii) Generic Voter Drive			Transaction ID:
iii) Exempt Activities			Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)			
a) FilComFR 2/24/06 (02/24/2006)	5723.99		Transaction ID: H3.17325.0
b)			Transaction ID:
c) Total Amount Transferred for Direct Fundraising		5723.99	
v) Direct Candidate Support (List of Activity or Event Identifier)			
a)			Transaction ID:
b)			Transaction ID:
c) Total Amount Transferred For Direct Candidate Support			
vi) Public Communications Referring Only to Party (Made by PAC)			Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Democratic Party of Hawaii

NAME OF ACCOUNT Demo. Pty. HI. Sta- te #2	DATE OF RECEIPT M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 6	TOTAL AMOUNT TRANSFERRED 18660.29
---	---	--------------------------------------

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	18660.29	Transaction ID: H3.17330
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Democratic Party of Hawaii

NAME OF ACCOUNT Demo. Pty. HI. Sta- te #2	DATE OF RECEIPT M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 6	TOTAL AMOUNT TRANSFERRED 8000.00
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BREAKDOWN OF TRANSFER RECEIVED		8000.00
i) Total Administrative		Transaction ID: H3.17332
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED	
TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Democratic Party of Hawaii

NAME OF ACCOUNT Demo. Pty. HI. Sta- te #2	DATE OF RECEIPT M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 0 6	TOTAL AMOUNT TRANSFERRED 2000.00
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BREAKDOWN OF TRANSFER RECEIVED		2000.00
i) Total Administrative		Transaction ID: H3.17333
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED		
TOTAL This Period (Administrative)	39614.65	
TOTAL This Period (Generic Voter Drive)	0.00	
TOTAL This Period (Exempt Activities)	0.00	
TOTAL This Period (Direct Fundraising)	5723.99	
TOTAL This Period (Direct Candidate Support)	0.00	
TOTAL This Period (Public Communications Referring Only to Party)	0.00	
TOTAL This Period (Total Amount Transferred)	45338.64	

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial) Clay Springer			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1760 Akaakoa St.			Allocated Activity or Event Year-To-Date 72224.44		
City Kailua	State HI	Zip Code 96734	Date MM / DD / YYYY 04 / 01 / 2006		
Purpose of Disbursement: Reimb.-Facility Rental			Category/Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.17580		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.50		39.50		50.00

B. Full Name (Last, First, Middle Initial) Florence Kong Kee			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 844 Hoomaoana St.			Allocated Activity or Event Year-To-Date 72369.90		
City Pearl City	State HI	Zip Code 96782	Date MM / DD / YYYY 04 / 01 / 2006		
Purpose of Disbursement: Reimb-Field Work Supplies			Category/Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.17582		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.55		114.91		145.46

C. Full Name (Last, First, Middle Initial) Brickwood Galuteria			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3462 Pakui St.			Allocated Activity or Event Year-To-Date 72384.90		
City Honolulu	State HI	Zip Code 96816	Date MM / DD / YYYY 04 / 01 / 2006		
Purpose of Disbursement: Reimb-Maintenance			Category/Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.17584		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.15		11.85		15.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
44.20		166.26		210.46

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial) Ellen Ryan			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1206 Ulunahale St.			Allocated Activity or Event Year-To-Date 72434.04		
City	State	Zip Code	Date <input type="text" value="04"/> / <input type="text" value="03"/> / <input type="text" value="2006"/>		
Kailua	HI	96734			
Purpose of Disbursement: Reimb.- Stamps			Category/Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.17345		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.32		38.82		49.14

B. Full Name (Last, First, Middle Initial) Norman Taira			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 46-226 Punawai St.			Allocated Activity or Event Year-To-Date 73034.04		
City	State	Zip Code	Date <input type="text" value="04"/> / <input type="text" value="03"/> / <input type="text" value="2006"/>		
Kaneohe	HI	96744			
Purpose of Disbursement: Reimb-Parking			Category/Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.17586		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
126.00		474.00		600.00

C. Full Name (Last, First, Middle Initial) Richard, Halverson, Jr.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1180 Mokuhano St.			Allocated Activity or Event Year-To-Date 73371.19		
City	State	Zip Code	Date <input type="text" value="04"/> / <input type="text" value="05"/> / <input type="text" value="2006"/>		
Honolulu	HI	96825			
Purpose of Disbursement: Reimb-Comp. Supp/Membership Cards			Category/Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.17588		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
70.80		266.35		337.15

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
207.12		779.17		986.29

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial) Ellen Ryan			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1206 Ulunahale St.			Allocated Activity or Event Year-To-Date 73404.01		
City Kailua	State HI	Zip Code 96734	Date <input type="text" value="04"/> / <input type="text" value="05"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Reimb-Beverages for SCC Mtg			Transaction ID: H4.17590		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="6.89"/>		<input type="text" value="25.93"/>		<input type="text" value="32.82"/>

B. Full Name (Last, First, Middle Initial) Martin Rice			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5117 Lokene St.			Allocated Activity or Event Year-To-Date 73556.01		
City Kapaa	State HI	Zip Code 96746	Date <input type="text" value="04"/> / <input type="text" value="05"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Reimb-Airfare			Transaction ID: H4.17592		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="31.92"/>		<input type="text" value="120.08"/>		<input type="text" value="152.00"/>

C. Full Name (Last, First, Middle Initial) Management Information Consultants			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 22885			Allocated Activity or Event Year-To-Date 73993.51		
City Honolulu	State HI	Zip Code 96802	Date <input type="text" value="04"/> / <input type="text" value="06"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Parliamentary Opinion Re Conv.			Transaction ID: H4.17348		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="91.88"/>		<input type="text" value="345.62"/>		<input type="text" value="437.50"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="130.69"/>		<input type="text" value="491.63"/>		<input type="text" value="622.32"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial) Florence Kong Kee			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 844 Hoomaoana St.			Allocated Activity or Event Year-To-Date 74176.71		
City Pearl City	State HI	Zip Code 96782	Date <input type="text" value="04"/> / <input type="text" value="06"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Reimb.- Airfare			Transaction ID: H4.17594		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
38.47		144.73		183.20

B. Full Name (Last, First, Middle Initial) Justin Avery			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 01393			Allocated Activity or Event Year-To-Date 74334.91		
City Kapaa	State HI	Zip Code 96746	Date <input type="text" value="04"/> / <input type="text" value="06"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Reimb-Airfare			Transaction ID: H4.17596		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.22		124.98		158.20

C. Full Name (Last, First, Middle Initial) Florence Kong Kee			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 844 Hoomaoana St.			Allocated Activity or Event Year-To-Date 74493.11		
City Pearl City	State HI	Zip Code 96782	Date <input type="text" value="04"/> / <input type="text" value="06"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Reimb-Airfare			Transaction ID: H4.17598		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.22		124.98		158.20

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
104.91		394.69		499.60

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial) Florence Kong Kee			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 844 Hoomaoana St.			Allocated Activity or Event Year-To-Date 74533.76		
City Pearl City	State HI	Zip Code 96782	Date MM / DD / YYYY 04 / 10 / 2006		
Purpose of Disbursement: Reimb-Field Oper. Exp.			Category/ Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.17600		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.54		32.11		40.65

B. Full Name (Last, First, Middle Initial) Hawaiian TelCom			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 9688			Allocated Activity or Event Year-To-Date 75161.49		
City Mission City	State CA	Zip Code 91346	Date MM / DD / YYYY 04 / 11 / 2006		
Purpose of Disbursement: Hdqt. Phone & Fax Serv.			Category/ Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.17354		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
131.82		495.91		627.73

C. Full Name (Last, First, Middle Initial) Ellen Ryan			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1206 Ulunahale St.			Allocated Activity or Event Year-To-Date 75176.49		
City Kailua	State HI	Zip Code 96734	Date MM / DD / YYYY 04 / 11 / 2006		
Purpose of Disbursement: Reimb-Maintenance			Category/ Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.17602		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.15		11.85		15.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
143.51		539.87		683.38

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial) Florence Kong Kee			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 844 Hoomaoana St.			Allocated Activity or Event Year-To-Date 75251.58		
City Pearl City	State HI	Zip Code 96782	Date MM / DD / YYYY 04 / 12 / 2006		
Purpose of Disbursement: Reimb-Field Oper. Exp.			Category/ Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.17604		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.77		59.32		75.09

B. Full Name (Last, First, Middle Initial) Altres, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 967 Kapiolani Blvd.			Allocated Activity or Event Year-To-Date 79667.95		
City Honolulu	State HI	Zip Code 96814	Date MM / DD / YYYY 04 / 13 / 2006		
Purpose of Disbursement: Party Employee Leasing Fee			Category/ Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.17493		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
927.44		3488.93		4416.37

C. Full Name (Last, First, Middle Initial) Ellen Ryan			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1206 Ulunahale St.			Allocated Activity or Event Year-To-Date 79706.95		
City Kailua	State HI	Zip Code 96734	Date MM / DD / YYYY 04 / 17 / 2006		
Purpose of Disbursement: Reimb. - Stamps			Category/ Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.17358		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.19		30.81		39.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
951.40		3579.06		4530.46

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial) De Lage Landen			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 41601			Allocated Activity or Event Year-To-Date 80159.79		
City Philadelphia	State PA	Zip Code 19101	Date <input type="text" value="04"/> / <input type="text" value="17"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Hdqt. Copier Lease Rent			Transaction ID: H4.17360		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
95.10		357.74		452.84

B. Full Name (Last, First, Middle Initial) Canon Financial Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 42937			Allocated Activity or Event Year-To-Date 80550.90		
City Philadelphia	State PA	Zip Code 19101-2937	Date <input type="text" value="04"/> / <input type="text" value="17"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Hdqt. Copier Lease Rent			Transaction ID: H4.17361		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
82.13		308.98		391.11

C. Full Name (Last, First, Middle Initial) Guide.Net, Net			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2800 Woodlawn Dr. Suite 128			Allocated Activity or Event Year-To-Date 82634.22		
City Honolulu	State HI	Zip Code 96822	Date <input type="text" value="04"/> / <input type="text" value="17"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Database Services			Transaction ID: H4.17362		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
437.50		1645.82		2083.32

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
614.73		2312.54		2927.27

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial) Marie Strazer			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 36 Hualilii St.			Allocated Activity or Event Year-To-Date 82820.42		
City Hilo	State HI	Zip Code 96720	Date <input type="text" value="04"/> / <input type="text" value="17"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Reimb-Airfare			Category/ Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.17606		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39.10		147.10		186.20

B. Full Name (Last, First, Middle Initial) Florence Kong Kee			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 844 Hoomaoana St.			Allocated Activity or Event Year-To-Date 83060.16		
City Pearl City	State HI	Zip Code 96782	Date <input type="text" value="04"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Reimb-Office Supplies			Category/ Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.17608		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
50.35		189.39		239.74

C. Full Name (Last, First, Middle Initial) Brickwood Galuteria			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3462 Pakui St.			Allocated Activity or Event Year-To-Date 86606.01		
City Honolulu	State HI	Zip Code 96816	Date <input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Reimb-Travel to DNC Mtg			Category/ Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.17610		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
744.63		2801.22		3545.85

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
834.08		3137.71		3971.79

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial) First American Title Co., Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 333 Queen St. Ste.700			Allocated Activity or Event Year-To-Date 91128.79		
City State Zip Code Honolulu HI 96813	Category/ Type		Date M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 6		
Purpose of Disbursement: Hdqt. May Rent			Transaction ID: H4.17364		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
949.78		3573.00		4522.78

B. Full Name (Last, First, Middle Initial) A-American Honolulu			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 720 South St.			Allocated Activity or Event Year-To-Date 91253.80		
City State Zip Code Honolulu HI 96813	Category/ Type		Date M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 6		
Purpose of Disbursement: Monthly Storage Charges			Transaction ID: H4.17367		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.25		98.76		125.01

C. Full Name (Last, First, Middle Initial) Pitney Bowes, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 856390			Allocated Activity or Event Year-To-Date 91631.34		
City State Zip Code Louisville KY 40285-6390	Category/ Type		Date M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 6		
Purpose of Disbursement: Postage Machine Lease Rent			Transaction ID: H4.17366		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
79.28		298.26		377.54

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1055.31		3970.02		5025.33

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial) Oceanic Time Warner Cable			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 200 Akamainui St.			Allocated Activity or Event Year-To-Date 91699.33		
City Mililani	State HI	Zip Code 96789	Category/ Type		
Purpose of Disbursement: Hdqt. Cable Service					
Activity or Event Identifier: Administrative			Date M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6		

Transaction ID: H4.17368

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.28		53.71		67.99

B. Full Name (Last, First, Middle Initial) Altres, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 967 Kapiolani Blvd.			Allocated Activity or Event Year-To-Date 95453.18		
City Honolulu	State HI	Zip Code 96814	Category/ Type		
Purpose of Disbursement: Party Employee Leasing Fee					
Activity or Event Identifier: Administrative			Date M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6		

Transaction ID: H4.17494

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
788.31		2965.54		3753.85

C. Full Name (Last, First, Middle Initial) CENPAC Properties, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1150 S. King St. #1101			Allocated Activity or Event Year-To-Date 96053.18		
City Honolulu	State HI	Zip Code 96814	Category/ Type		
Purpose of Disbursement: Hdqt. Parking for Staff					
Activity or Event Identifier: Administrative			Date M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6		

Transaction ID: H4.17369

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
126.00		474.00		600.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
928.59		3493.25		4421.84

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial) Kapiolani Signs			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1311 Kapiolani Blvd. #102			Allocated Activity or Event Year-To-Date 96150.05		
City Honolulu	State HI	Zip Code 96814	Date <input type="text" value="05"/> / <input type="text" value="01"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Union Rally Banners			Category/ Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.17374		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.34		76.53		96.87

B. Full Name (Last, First, Middle Initial) Myron Lathan			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 75329			Allocated Activity or Event Year-To-Date 96280.05		
City Kapolei	State HI	Zip Code 96707	Date <input type="text" value="05"/> / <input type="text" value="03"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Printer Repairs			Category/ Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.17375		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.30		102.70		130.00

C. Full Name (Last, First, Middle Initial) Guide.Net, Net			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2800 Woodlawn Dr. Suite 128			Allocated Activity or Event Year-To-Date 98363.37		
City Honolulu	State HI	Zip Code 96822	Date <input type="text" value="05"/> / <input type="text" value="03"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Database Services			Category/ Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.17378		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
437.50		1645.82		2083.32

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
485.14		1825.05		2310.19

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial)
Info Grafik, Inc.
Mailing Address
1026 Nuuanu Ave. Garden Suite
City State Zip Code
Honolulu HI 96817
Purpose of Disbursement:
Web Hosting Serv.- 6 mo.
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
100082.11
Date 05 / 08 / 2006
Transaction ID: H4.17379

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
360.94		1357.80		1718.74

B. Full Name (Last, First, Middle Initial)
Clay Springer
Mailing Address
1760 Akaakoa St.
City State Zip Code
Kailua HI 96734
Purpose of Disbursement:
Reimb-Travel to Kauai Conv.
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
100250.11
Date 05 / 08 / 2006
Transaction ID: H4.17612

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.28		132.72		168.00

C. Full Name (Last, First, Middle Initial)
CENPAC Properties, Inc.
Mailing Address
1150 S. King St. #1101
City State Zip Code
Honolulu HI 96814
Purpose of Disbursement:
Parking Validation Stickers
Activity or Event Identifier:
Administrative

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
100535.11
Date 05 / 10 / 2006
Transaction ID: H4.17380

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
59.85		225.15		285.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
456.07		1715.67		2171.74

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial) Altres, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 967 Kapiolani Blvd.			Allocated Activity or Event Year-To-Date 104951.48		
City	State	Zip Code	Category/ Type		
Honolulu	HI	96814			
Purpose of Disbursement: Party Employee Leasing Fee			Date <input type="text" value="05"/> / <input type="text" value="11"/> / <input type="text" value="2006"/>		
Activity or Event Identifier: Administrative			Transaction ID: H4.17495		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
927.44		3488.93		4416.37

B. Full Name (Last, First, Middle Initial) Hawaii Business Equipment, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 590A Paiea St.			Allocated Activity or Event Year-To-Date 106127.94		
City	State	Zip Code	Category/ Type		
Honolulu	HI	96819			
Purpose of Disbursement: Copier Maintenance Agmt.			Date <input type="text" value="05"/> / <input type="text" value="12"/> / <input type="text" value="2006"/>		
Activity or Event Identifier: Administrative			Transaction ID: H4.17382		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
247.06		929.40		1176.46

C. Full Name (Last, First, Middle Initial) De Lage Landen			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 41601			Allocated Activity or Event Year-To-Date 106580.78		
City	State	Zip Code	Category/ Type		
Philadelphia	PA	19101			
Purpose of Disbursement: Hdqt. Copier Lease Rent			Date <input type="text" value="05"/> / <input type="text" value="12"/> / <input type="text" value="2006"/>		
Activity or Event Identifier: Administrative			Transaction ID: H4.17383		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
95.10		357.74		452.84

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1269.60		4776.07		6045.67

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial) The Center-Pride Account			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address P.O. Box 2718			Allocated Activity or Event Year-To-Date 106730.78																						
City	State	Zip Code	Category/ Type																						
Honolulu	HI	96823																							
Purpose of Disbursement: Gay-Pride Parade Event Fee			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>5</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	1	5	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	5	/	1	5	/	2	0	0	6																
Activity or Event Identifier: Administrative			Transaction ID: H4.17385																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.50		118.50		150.00

B. Full Name (Last, First, Middle Initial) Yuriko Sugimura			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 98-340 Koauka Loop Apt. 112			Allocated Activity or Event Year-To-Date 106834.94																						
City	State	Zip Code	Category/ Type																						
Aiea	HI	96701																							
Purpose of Disbursement: Reimb. Locksmith Serv.			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>5</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	1	5	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	5	/	1	5	/	2	0	0	6																
Activity or Event Identifier: Administrative			Transaction ID: H4.17387																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.87		82.29		104.16

C. Full Name (Last, First, Middle Initial) Joshua Wisch			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 712 Wanaao Rd.			Allocated Activity or Event Year-To-Date 107003.14																						
City	State	Zip Code	Category/ Type																						
Kailua	HI	96734																							
Purpose of Disbursement: Reimb-Airfare			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>5</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	1	5	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	5	/	1	5	/	2	0	0	6																
Activity or Event Identifier: Administrative			Transaction ID: H4.17614																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.32		132.88		168.20

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
88.69		333.67		422.36

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial) Florence Kong Kee			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 844 Hoomaoana St.			Allocated Activity or Event Year-To-Date 107111.56		
City Pearl City	State HI	Zip Code 96782	Date <input type="text" value="05"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Reimb-Field Oper. Exp.			Category/ Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.17616		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.77		85.65		108.42

B. Full Name (Last, First, Middle Initial) Robert Hawaii, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 680 Iwilei Rd., Ste. 700			Allocated Activity or Event Year-To-Date 107597.42		
City Honolulu	State HI	Zip Code 96817	Date <input type="text" value="05"/> / <input type="text" value="23"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Trolley Rental for 4th of July Parade			Category/ Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.17395		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
102.03		383.83		485.86

C. Full Name (Last, First, Middle Initial) Ellen Ryan			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1206 Ulunahahele St.			Allocated Activity or Event Year-To-Date 107687.09		
City Kailua	State HI	Zip Code 96734	Date <input type="text" value="05"/> / <input type="text" value="23"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Reimb-Stamps/Supplies			Category/ Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.17618		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.83		70.84		89.67

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
143.63		540.32		683.95

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial) Oceanic Time Warner Cable			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 200 Akamainui St.			Allocated Activity or Event Year-To-Date 107755.08		
City Mililani	State HI	Zip Code 96789	Date <input type="text" value="05"/> / <input type="text" value="24"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Hdqt. Cable Service			Transaction ID: H4.17394		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.28		53.71		67.99

B. Full Name (Last, First, Middle Initial) Ellen Ryan			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1206 Ulunahale St.			Allocated Activity or Event Year-To-Date 107801.96		
City Kailua	State HI	Zip Code 96734	Date <input type="text" value="05"/> / <input type="text" value="25"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Reimb. - Meeting Gavel			Transaction ID: H4.17397		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.84		37.04		46.88

C. Full Name (Last, First, Middle Initial) Altres, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 967 Kapiolani Blvd.			Allocated Activity or Event Year-To-Date 111555.81		
City Honolulu	State HI	Zip Code 96814	Date <input type="text" value="05"/> / <input type="text" value="25"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Party Employee Leasing Fee			Transaction ID: H4.17496		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
788.31		2965.54		3753.85

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
812.43		3056.29		3868.72

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial)
First American Title Co., Inc.

Mailing Address
333 Queen St. Ste.700

City State Zip Code
Honolulu HI 96813

Purpose of Disbursement:
Hdqt. June Rent

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

116078.59

Date MM / DD / YYYY
05 / 30 / 2006

Transaction ID: H4.17400

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
949.78		3573.00		4522.78

B. Full Name (Last, First, Middle Initial)
GENPAC Properties, Inc.

Mailing Address
1150 S. King St. #1101

City State Zip Code
Honolulu HI 96814

Purpose of Disbursement:
Staff Hdqt. Parking

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

116478.59

Date MM / DD / YYYY
05 / 30 / 2006

Transaction ID: H4.17401

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
84.00		316.00		400.00

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

Mailing Address
967 Kapiolani Blvd.

City State Zip Code
Honolulu HI 96814

Purpose of Disbursement:
Party Employee Leasing Fee

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

120532.73

Date MM / DD / YYYY
06 / 02 / 2006

Transaction ID: H4.17497

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
851.37		3202.77		4054.14

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1885.15		7091.77		8976.92

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial)
Altres, Inc.

Mailing Address
967 Kapiolani Blvd.

City State Zip Code
Honolulu HI 96814

Purpose of Disbursement:
Party Employee Leasing Fee

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

122365.54

Date 06 / 08 / 2006

Transaction ID: H4.17498

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
384.89		1447.92		1832.81

B. Full Name (Last, First, Middle Initial)
Canon Financial Inc.

Mailing Address
P.O. Box 42937

City State Zip Code
Philadelphia PA 19101-2937

Purpose of Disbursement:
Hdqt. Copier Lease Rent

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

122756.65

Date 06 / 10 / 2006

Transaction ID: H4.17407

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
82.13		308.98		391.11

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

Mailing Address
222 Liliuokalani Ave. #1104

City State Zip Code
Honolulu HI 96815

Purpose of Disbursement:
Reimb.- Stamps

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

122772.36

Date 06 / 10 / 2006

Transaction ID: H4.17408

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.30		12.41		15.71

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
470.32		1769.31		2239.63

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial) Hawaiian TelCom			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 9688			Allocated Activity or Event Year-To-Date 123422.09		
City Mission City	State CA	Zip Code 91346	Date <input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Hdqtr. Phone/Fax Serv.			Transaction ID: H4.17406		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
136.44		513.29		649.73

B. Full Name (Last, First, Middle Initial) Guide.Net, Net			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2800 Woodlawn Dr. Suite 128			Allocated Activity or Event Year-To-Date 125505.41		
City Honolulu	State HI	Zip Code 96822	Date <input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Database Services			Transaction ID: H4.17411		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
437.50		1645.82		2083.32

C. Full Name (Last, First, Middle Initial) Ellen Ryan			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1206 Ulunahale St.			Allocated Activity or Event Year-To-Date 127013.14		
City Kailua	State HI	Zip Code 96734	Date <input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Exec. Dir. Severance Pay			Transaction ID: H4.17412		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
316.62		1191.11		1507.73

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
890.56		3350.22		4240.78

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial)
De Lage Landen

Mailing Address
P.O. Box 41601

City State Zip Code
Philadelphia PA 19101

Purpose of Disbursement:
Hdqtr. Copier Lease Rent

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

127465.98

Date 06 / 12 / 2006

Transaction ID: H4.17414

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
95.10 + 357.74 = 452.84

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

Mailing Address
5117 Lokene Rd.

City State Zip Code
Kapaa HI 96746

Purpose of Disbursement:
Party Stationery

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

127896.24

Date 06 / 12 / 2006

Transaction ID: H4.17415

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
90.35 + 339.91 = 430.26

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

Mailing Address
1760 Akaakoa St.

City State Zip Code
Kailua HI 96734

Purpose of Disbursement:
Reimb-Stamps

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

127931.34

Date 06 / 12 / 2006

Transaction ID: H4.17417

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
7.37 + 27.73 = 35.10

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
192.82 + 725.38 = 918.20

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial) CENPAC Properties, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1150 S. King St. #1101			Allocated Activity or Event Year-To-Date 128131.34		
City Honolulu	State HI	Zip Code 96814	Date <input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Hdqt. Staff Parking			Transaction ID: H4.17418		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.00		158.00		200.00

B. Full Name (Last, First, Middle Initial) Ernest Heen			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3076 Diamond Head Rd.			Allocated Activity or Event Year-To-Date 128256.35		
City Honolulu	State HI	Zip Code 96815	Date <input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Reimb-Storage			Transaction ID: H4.17622		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.25		98.76		125.01

C. Full Name (Last, First, Middle Initial) Clay Springer			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1760 Akaakoa St.			Allocated Activity or Event Year-To-Date 128669.31		
City Kailua	State HI	Zip Code 96734	Date <input type="text" value="06"/> / <input type="text" value="16"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Reimb-Supplies			Transaction ID: H4.17419		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
86.72		326.24		412.96

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
154.97		583.00		737.97

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial) Altres, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 967 Kapiolani Blvd.			Allocated Activity or Event Year-To-Date 130170.86		
City Honolulu	State HI	Zip Code 96814	Date <input type="text" value="06"/> / <input type="text" value="22"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Party Employee Leasing Fee			Transaction ID: H4.17499		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
315.33		1186.22		1501.55

B. Full Name (Last, First, Middle Initial) GENPAC Properties, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1150 S. King St. #1101			Allocated Activity or Event Year-To-Date 130470.86		
City Honolulu	State HI	Zip Code 96814	Date <input type="text" value="06"/> / <input type="text" value="23"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Hdqt. Staff Parking			Transaction ID: H4.17420		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
63.00		237.00		300.00

C. Full Name (Last, First, Middle Initial) David Kaupu			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2131 Pona St.			Allocated Activity or Event Year-To-Date 130570.86		
City Honolulu	State HI	Zip Code 96817	Date <input type="text" value="06"/> / <input type="text" value="23"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Honorarium-Conv.			Transaction ID: H4.17468		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.00		79.00		100.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
399.33		1502.22		1901.55

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial) Debi Hartmann			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 54-178 Hauula Homestead Rd.			Allocated Activity or Event Year-To-Date 131125.62		
City	State	Zip Code	Category/Type		
Hauula	HI	96717			
Purpose of Disbursement: Reimb-Office Supplies					
Activity or Event Identifier: Administrative			Date <input type="text" value="06"/> / <input type="text" value="23"/> / <input type="text" value="2006"/> Transaction ID: H4.17621		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
116.50		438.26		554.76

B. Full Name (Last, First, Middle Initial) American T-Shirts Company			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1217 S King St.			Allocated Activity or Event Year-To-Date 243.79		
City	State	Zip Code	Category/Type		
Honolulu	HI	96814			
Purpose of Disbursement: T-shirts for Tournament Players					
Activity or Event Identifier: Korean Comm. Event (GFR)(05/16/2006)			Date <input type="text" value="05"/> / <input type="text" value="03"/> / <input type="text" value="2006"/> Transaction ID: H4.17629		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
158.46		85.33		243.79

C. Full Name (Last, First, Middle Initial) Pearl Country Club			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 98-535 Kaonohi St.			Allocated Activity or Event Year-To-Date 6292.59		
City	State	Zip Code	Category/Type		
Aiea	HI	96701			
Purpose of Disbursement: Golf Tournament Green Fees					
Activity or Event Identifier: Korean Comm. Event (GFR)(05/16/2006)			Date <input type="text" value="05"/> / <input type="text" value="15"/> / <input type="text" value="2006"/> Transaction ID: H4.17388		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3931.72		2117.08		6048.80

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4206.68		2640.67		6847.35

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial) Pearl Country Club			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 98-535 Kaonohi St.			Allocated Activity or Event Year-To-Date 11173.79		
City Aiea	State HI	Zip Code 96701	Date <input type="text" value="05"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Golf Tournament Catering Exp.			Transaction ID: H4.17390		
Activity or Event Identifier: Korean Comm. Event (GFR)(05/16/2006)					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3172.78		1708.42		4881.20

B. Full Name (Last, First, Middle Initial) Ellen Ryan			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1206 Ulunahale St.			Allocated Activity or Event Year-To-Date 11509.82		
City Kailua	State HI	Zip Code 96734	Date <input type="text" value="05"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Reimb-FR Supplies			Transaction ID: H4.17624		
Activity or Event Identifier: Korean Comm. Event (GFR)(05/16/2006)					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
218.42		117.61		336.03

C. Full Name (Last, First, Middle Initial) Renate Kawakami			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3175 Waialae Ave. #503			Allocated Activity or Event Year-To-Date 11559.82		
City Honolulu	State HI	Zip Code 96816	Date <input type="text" value="05"/> / <input type="text" value="16"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Reimb-Leis for Players			Transaction ID: H4.17626		
Activity or Event Identifier: Korean Comm. Event (GFR)(05/16/2006)					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.50		39.50		50.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3401.70		1865.53		5267.23

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial)
Pearl Country Club

Mailing Address
98-535 Kaonohi St.

City State Zip Code
Aiea HI 96701

Purpose of Disbursement:
Corkage Fee

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

11609.82

Activity or Event Identifier:
Korean Comm. Event (GFR)(05/16/2006)

Date 05 / 25 / 2006

Transaction ID: H4.17398

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.00		18.00		50.00

B. Full Name (Last, First, Middle Initial)
KOAM Media Group

Mailing Address
320 Ward Ave. Ste. 211

City State Zip Code
Honolulu HI 96814

Purpose of Disbursement:
Ads for Golf Tournament

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

11922.32

Activity or Event Identifier:
Korean Comm. Event (GFR)(05/16/2006)

Date 06 / 12 / 2006

Transaction ID: H4.17409

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
200.00		112.50		312.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
232.00		130.50		362.50

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
20103.63		50769.87		70873.50

Image# 26940249745

Form/Schedule: **F3XN** None of the Party's staff have expended more than 25% of their time in fund raising activities.

Transaction ID:

Form/Schedule: **SA15** Ed Case for Senate Campaign

Transaction ID: **SA15.16084**

Image# 26940249746

Form/Schedule: **H4** 4/1/06 Windward Community College, Kaneohe, HI 96744 - Meeting with BYU College Dems
Transaction ID: **H4.17580**

Form/Schedule: **H4** 4/1/06 Office Depot, 1020 Ahua St., Hon., HI. - copy paper, folders, pens and pencils
Transaction ID: **H4.17582**

Image# 26940249747

Form/Schedule: **H4** 3/17/06 Brendon Herold, 666 Prospect St., Hon., HI 96822 - window washer at hdqt.
Transaction ID: **H4.17584**

Form/Schedule: **H4** 4/3/06 Central Pacific Properties, Inc., 1314 S. King. St., Hon., HI 96814 - Hdqt. parking passes for staff
Transaction ID: **H4.17586**

Image# 26940249748

Form/Schedule: **H4** 3/1/06 ID Card Group, P.O. Box 11127, Westminster, Calif. 92685; computer supplies and card stock for membership cards.
Transaction ID: **H4.17588**

Form/Schedule: **H4** 4/5/06 Safeway, Beretania St., Hon., HI 96814. Beverages for State Central Committee Meeting
Transaction ID: **H4.17590**

Image# 26940249749

Form/Schedule: **H4** 4/7/06 ALOha Airlines, Honolulu Int'l Airport., Hon., HI 96719 - round-trip airfare for Kauai County Chair to attend State Central Committee meeting
Transaction ID: **H4.17592**

Form/Schedule: **H4** 4/6/06 Aloha Airlines, Honolulu Int'l. Airport, Hon., HI 96819-\$183.20 Airfare to Maui for grassroots mtg.
Transaction ID: **H4.17594**

Image# 26940249750

Form/Schedule: **H4** 4/6/06 Aloha Airlines, Honolulu Int'l Airport, Hon., HI 96819, \$158.20-airfare to Hilo for grassroots meeting.
Transaction ID: **H4.17596**

Form/Schedule: **H4** 4/7/06 Aloha Airlines, Honolulu Int'l Airport, Honolulu, HI 96819; travel to Hilo for grassroot fieldwork
Transaction ID: **H4.17598**

Image# 26940249751

Form/Schedule: **H4** 4/6/06 Costco Iwilei, Hon., HI 96817, \$16.44, - Cookies for meeting with Hilo College Dems; 4/7/06 Liberty Cafe, 1201 Kinoole St., Hilo, HI 96720; \$12.26 - lunch for volunteers; 4/7/06 Kawamoto Store LLC, 784 Kilauea Ave., Hilo, HI 96720, \$11.45 -refreshment for meeting
Transaction ID: **H4.17600**

Form/Schedule: **H4** 4/11/06 Brendon Herold, 666 Prospect St., Hon., HI 96822; pay window washer
Transaction ID: **H4.17602**

Image# 26940249752

Form/Schedule: **H4** 4/12/06 Costco Iwilea, Honolulu HI 96817, \$25.09 - meeting refreshments; 4/12/06 Cen Pac Properties, 3150 S.
Transaction ID: **H4.17604** King St., Ste. 1101, Hon., HI 96814 \$50.00, reimb. 1/2 monthly parking (overpayment)

Form/Schedule: **H4** Payroll and employee benefits for 2 employees
Transaction ID: **H4.17493**

Image# 26940249753

Form/Schedule: **H4** 4/7/06 Aloha Airlines, Honolulu Int'l Airport, Hon., HI 96819, roundtrip airfare from Hilo to Honolulu to attend State Central Committee meeting
Transaction ID: **H4.17606**

Form/Schedule: **H4** 4/13/06 Zippy's Waimalu, Aiea, HI 96701, \$15.68, refreshments for meeting with Leeward College Dems; 4/14/06 Chun Wah Kam Waimalu, Aiea, HI. 96701, \$7.86, refreshments for meeting with Waipahu Filipino seniors; 4/17/06 Cafe Sistina, 1314 S. King St., Hon., HI 96814, \$30.00 for lunch for volunteers; 4/17/06 Fisher Hawaii, 450 Cooke St., Hon., Hi., 96813, \$186.20, paper, folders, card stock
Transaction ID: **H4.17608**

Image# 26940249754

Form/Schedule: **H4** 4/11/06 www.virtually there.com for Hawaiian Air tickets to San Francisco to meet wwith Mayor Gavin Newsome,
Transaction ID: **H4.17610** \$1,219.31; 4/11/06 American Airlines@aa.com for American Airlines tickets from San Fran. to New Orleans for DNC
meeting; 4/14/06 Hotel Nikko, 222 Mason St., San Fran, Calif. 94102, \$625.33; 4/19-4/22/06 Sheraton New Orleans
Hotel, 500 Canal St., New Orleans, LA 70130, \$548.01 for DNC meeting.

Form/Schedule: **H4** Payroll and employee benefits for 2 employees
Transaction ID: **H4.17494**

Image# 26940249755

Form/Schedule: **H4** 5/3/06 Hawaiian Airlines, Honolulu Int'l Airport, Hon., HI 96819, \$158.20, airfare to Kauai for training and
Transaction ID: **H4.17612** County Convention; 5/6/06 AMPCO, HOnolulu Int'l Airport, Hon., HI 96819, \$10.00 airport parking,

Form/Schedule: **H4** Payroll and employee benefits for 2 employees
Transaction ID: **H4.17495**

Image# 26940249756

Form/Schedule: **H4** 5/15/06 Paradise Security Lock Service, 4224 Waiālae Ave., #116, Hon., HI 96816 \$104.16 - repair door at headq-
Transaction ID: **H4.17387** uarter

Form/Schedule: **H4** 5/15/06 Aloha Airlines, Honolulu Int'l Airport, Hon., Hi 96819 \$168.20 trave to Hilo for County Meeting
Transaction ID: **H4.17614**

Image# 26940249757

Form/Schedule: **H4** 4/27/06 Gytaku Restaurant, 1824 S. King.St., Hon., HI 96814 \$42.40, food for volunteers-Pineapple Festival;
Transaction ID: **H4.17616** 5/3/06 Golden Duck Restaurant, 1221 S. King St., Hon., HI96814, \$11.98 Food for volunteers; 5/5/06 Pae Thai Restaurant, 1246 S. King St., Hon., HI 96814 - Food for volunteer at labor convention; 5/12/06 Pagoda Restaurant, 1525 Rycroft St., Hon., HI 96814 \$20.47, food for volunteers at Filipino Festival

Form/Schedule: **H4** 5/22/06 USPS, Honolulu, HI 96813 \$39.00 Stamps; 5/22/06 Office Max, 770 Ala Moana Blvd, Hon., HI 96814 \$50.67
Transaction ID: **H4.17618** binders, paper, bulletin board

Image# 26940249758

Form/Schedule: **H4** 5/25/06 Hula Supply, 2346 S. King St., Hon., HI \$46.88 Meeting Gavel
Transaction ID: **H4.17397**

Form/Schedule: **H4** Payroll and employee benefits for 2 employees
Transaction ID: **H4.17496**

Image# 26940249759

Form/Schedule: **H4** Payroll and employee benefits for 2 employees
Transaction ID: **H4.17497**

Form/Schedule: **H4** Payroll and employee benefits for Exec. Director - Final Paycheck.
Transaction ID: **H4.17498**

Image# 26940249760

Form/Schedule: **H4** 6/11/06 A-American Self-Storage, 720 South St., \$125.01, Storage Fee.
Transaction ID: **H4.17622**

Form/Schedule: **H4** 6/15/06 COMPUSA, 604 Ala Moana Blvd., Hon., HI 96813 \$229.15 Color Printer for Hdqt.; 6/16/06 Office Depot, 340
Transaction ID: **H4.17419** Kamakee St., Hon., HI 96814, \$183.81 printer ink, note pads, flags, letter opener

Image# 26940249761

Form/Schedule: **H4** Payroll and employee benefits for 1 employee
Transaction ID: **H4.17499**

Form/Schedule: **H4** 6/17/06 Office Max, 770 Ala Moana Blvd., Hon., 96814 \$82.74, ink cartridges, paper; 6/16/06 Office Depot, 340
Transaction ID: **H4.17621** Kamakee St., Hon., HI 96814 \$24.98, ink cartridge; 6/17/06 Costco Iwilea, Honolulu, HI 96817 \$69.77 gel pens,
ZMate USB; 6/20/06 Fisher Hawaii, 450 Cooke St., Hon., HI 96813, \$347.76, ink cartridges, paper, folders

Image# 26940249762

Form/Schedule: **H4** 5/12/06 Aloha Key, Awards & Gifts, 401 Cooke St., Hon., HI 96813, \$162.50 medals and ribbons; 5/15/06 GBC Ala Moana, Ala Moana Center, Hon., HI 96814; 14.98 T-shirt bags and twine; 5/15/05 Office Max, 770 Ala Moana Blvd., Hon., HI 96814 \$159.05 card stock, pens, clip boards

Transaction ID: **H4.17624**

Form/Schedule: **H4** 5/16/06 Fujikami Florist, 1200 Pensacola St., Hon., HI 96814 \$50 for leis for Golf Tournament

Transaction ID: **H4.17626**
