

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Espero for Congress

ADDRESS (number and street)

P.O. Box 60397

Check if different than previously reported. (ACC)

Ewa Beach

HI

96706

2. FEC IDENTIFICATION NUMBER ▼

C C00547067

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

HI

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y 04 / 01 / 2014

through

M M /

D D /

Y Y Y Y 06 / 30 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Bryan Jaco Gallarde

Signature of Treasurer Bryan Jaco Gallarde

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y 07 / 15 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Espero for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	25600.00	25600.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	25600.00	25600.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	16925.06	16925.06
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	16925.06	16925.06
8. Cash on Hand at Close of Reporting Period (from Line 27).....	8674.94	
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	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Espero for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	25400.00	25400.00
(ii) Unitemized.....	200.00	200.00
(iii) TOTAL of contributions from individuals ▶	25600.00	25600.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	25600.00	25600.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	25600.00	25600.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	16925.06	16925.06
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	16925.06	16925.06

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	25600.00
25. SUBTOTAL (add Line 23 and Line 24).....	25600.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	16925.06
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	8674.94

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 17
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Espero for Congress

A. Full Name (Last, First, Middle Initial)
Jarron Agustin

Mailing Address 91-413 Kupuna Loop

City: Waipahu State: HI Zip Code: 96707

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

Name of Employer: Starwood Resorts Occupation: Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2400.00

Date of Receipt: 05 / 14 / 2014

Transaction ID : SA11AI.4144

Amount of Each Receipt this Period: 2400.00

B. Full Name (Last, First, Middle Initial)
Tracy Arakaki

Mailing Address 98-1950 Kaahumanu St.

City: Pearl City State: HI Zip Code: 96782

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

Name of Employer: Self-Employed Occupation: Videographer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 04 / 24 / 2014

Transaction ID : SA11AI.4151

Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
Robert Bacher

Mailing Address 1759 Skyline Drive

City: Honolulu State: HI Zip Code: 96817

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

Name of Employer: Century 21 Occupation: Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 400.00

Date of Receipt: 06 / 30 / 2014

Transaction ID : SA11AI.4102

Amount of Each Receipt this Period: 400.00

SUBTOTAL of Receipts This Page (optional).....

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

3800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 17
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espero for Congress

A. Full Name (Last, First, Middle Initial)
Joan Marie Bennet

Mailing Address 3300 Pacific Heights Road

City Honolulu State HI Zip Code 96813

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

Name of Employer Bennet Group Occupation President & CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 14 / 2014

Transaction ID : SA11AI.4153

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Amado Bermuda

Mailing Address 91-800 Aama Place

City Ewa Beach State HI Zip Code 96706

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 14 / 2014

Transaction ID : SA11AI.4126

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Amado Bermuda

Mailing Address 91-800 Aama Place

City Ewa Beach State HI Zip Code 96706

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 24 / 2014

Transaction ID : SA11AI.4128

Amount of Each Receipt this Period
 850.00

SUBTOTAL of Receipts This Page (optional).....

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

2100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 17
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espero for Congress

A. Full Name (Last, First, Middle Initial)
Matthew Delaney

Mailing Address 745 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 HR Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : SA11AI.4137

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Gina Gallarde

Mailing Address 91-1105 Makaaloa St.

City Ewa Beach State HI Zip Code 96706

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 14 / 2014

Transaction ID : SA11AI.4119

Amount of Each Receipt this Period
 2000.00

C. Full Name (Last, First, Middle Initial)
John Garcia

Mailing Address 1315 Haloa Drive

City Honolulu State HI Zip Code 96818

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

Name of Employer City & County of Honolulu Occupation Legislative Aide

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : SA11AI.4129

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 17
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espero for Congress

A. Full Name (Last, First, Middle Initial)
Beth Grech

Mailing Address 1621 Anapuni Street #L

City Honolulu State HI Zip Code 96822

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11AI.4100

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Roland Santos Guieb

Mailing Address 94-095

City Waipahu State HI Zip Code 96797

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

Name of Employer Exhaust Sytems Hawaii Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 24 / 2014

Transaction ID : SA11AI.4149

Amount of Each Receipt this Period
 800.00

C. Full Name (Last, First, Middle Initial)
Greg Hiyakumoto

Mailing Address PO Box 2930

City Aiea State HI Zip Code 96701

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

Name of Employer RM Towill Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : SA11AI.4155

Amount of Each Receipt this Period
 1200.00

SUBTOTAL of Receipts This Page (optional).....

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 17
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Espero for Congress

A. Full Name (Last, First, Middle Initial)
Woody Hunt

Mailing Address **PO Box 12220**

City **El Paso** State **TX** Zip Code **79913**

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

Name of Employer **Hunt Companies** Occupation **President & CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1800.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : SA11AI.4146

Amount of Each Receipt this Period
1800.00

B. Full Name (Last, First, Middle Initial)
Lorraine Inouye

Mailing Address **215 Paukaa Drive**

City **Hilo** State **HI** Zip Code **96720**

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

Name of Employer **Self-Employed** Occupation **Consultant**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : SA11AI.4157

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Lyra Johnson

Mailing Address **3230 Ala Ilima Street**

City **Honolulu** State **HI** Zip Code **96817**

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

Name of Employer **Sofos Realty** Occupation **Realtor**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : SA11AI.4131

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

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

3300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 17
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Espero for Congress

A. Full Name (Last, First, Middle Initial)
Phyllis Kacher

Mailing Address 3652 Hilo Place

City Honolulu State HI Zip Code 96813

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

Name of Employer Hawaiian Management Company Occupation Senior Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : SA11AI.4159

Amount of Each Receipt this Period
 1200.00

B. Full Name (Last, First, Middle Initial)
Larry Ordonez

Mailing Address 1188 Bishop Street Suite 1201

City Honolulu State HI Zip Code 96813

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

Name of Employer House of Finance Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 15 / 2014

Transaction ID : SA11AI.4163

Amount of Each Receipt this Period
 1100.00

C. Full Name (Last, First, Middle Initial)
Pacita Saludes

Mailing Address 3230 Ala Ilima St. Apt. 403

City Honolulu State HI Zip Code 96818

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 03 / 2014

Transaction ID : SA11AI.4124

Amount of Each Receipt this Period
 1500.00

SUBTOTAL of Receipts This Page (optional).....

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

3800.00

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

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

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NAME OF COMMITTEE (In Full)
Espero for Congress

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

Mailing Address 99-1312 Koaha Place
Suite 103

City State Zip Code
Aiea HI 96701

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

Name of Employer Occupation
Self-Employed Defense Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2014

Transaction ID : SA11AI.4113

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
Eva Laird Smith

Mailing Address 98-1370 Koahehe Place

City State Zip Code
Pearl City HI 96706

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

Name of Employer Occupation
Self-Employed Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : SA11AI.4161

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Daniel Susott

Mailing Address 3645 Woodlawn Terrace Place

City State Zip Code
Honolulu HI 96822

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

Name of Employer Occupation
Self-Employed Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.4108

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional).....

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

2150.00

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

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

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NAME OF COMMITTEE (In Full)
Espero for Congress

A. Full Name (Last, First, Middle Initial)
Patricia Sutton

Mailing Address 3645 Woodlawn Terrace Place

City Honolulu State HI Zip Code 96822

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11AI.4111

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Shane Trout

Mailing Address 1134 Kinau Street Apt. 801

City Honolulu State HI Zip Code 96814

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

Name of Employer CMI America Occupation Hawaii/Guam Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : SA11AI.4147

Amount of Each Receipt this Period
 1500.00

C. Full Name (Last, First, Middle Initial)
Marlene Uesugi

Mailing Address 91-1099 Laaulu St. Apt. 8C

City Ewa Beach State HI Zip Code 96706

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

Name of Employer State Senate Occupation Legislative Office Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : SA11AI.4165

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....

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

2000.00

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

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

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NAME OF COMMITTEE (In Full)
Espero for Congress

A. Full Name (Last, First, Middle Initial)
Richard Weinstein

Mailing Address 1253 S. Beretania Street #2713

City Honolulu State HI Zip Code 96813

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

Name of Employer Weinstein Pharmaceuticals Occupation President & CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 14 / 2014

Transaction ID : SA11AI.4167

Amount of Each Receipt this Period
 1200.00

B. Full Name (Last, First, Middle Initial)
Robert Yoneoka

Mailing Address 156 Kokololio Place

City Honolulu State HI Zip Code 96814

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

Name of Employer KY International Occupation Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 28 / 2014

Transaction ID : SA11AI.4169

Amount of Each Receipt this Period
 800.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

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

2000.00

25400.00

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 17			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Espero for Congress

Full Name (Last, First, Middle Initial)
A. Aiea Copy

Mailing Address 99-115 Aiea Heights Drive

City Aiea State HI Zip Code 96701

Purpose of Disbursement Printing Services

Candidate Name **Espero for Congress**

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: HI District: 01

Date of Disbursement: 04 / 12 / 2014

Amount of Each Disbursement this Period: 1745.80

Transaction ID : SB17.4171

Category/Type: 001

Full Name (Last, First, Middle Initial)
B. Aiea Copy

Mailing Address 99-115 Aiea Heights Drive

City Aiea State HI Zip Code 96701

Purpose of Disbursement Printing Services

Candidate Name **Espero for Congress**

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: HI District: 01

Date of Disbursement: 06 / 01 / 2014

Amount of Each Disbursement this Period: 87.45

Transaction ID : SB17.4173

Category/Type: 001

Full Name (Last, First, Middle Initial)
C. Fisher Hawaii

Mailing Address 450 Cooke St.

City Honolulu State HI Zip Code 96813

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 01 / 2014

Amount of Each Disbursement this Period: 476.23

Transaction ID : SB17.4195

Category/Type:

SUBTOTAL of Disbursements This Page (optional) 2309.48

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 17			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Espero for Congress

Full Name (Last, First, Middle Initial) A. Kamehameha Schools			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 67 S King Street #200			Amount of Each Disbursement this Period 2675.00 Transaction ID : SB17.4177
City Honolulu	State HI	Zip Code 96813	
Purpose of Disbursement Rent - Campaign office		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) B. Kamehameha Schools			Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 67 S King Street #200			Amount of Each Disbursement this Period 2675.00 Transaction ID : SB17.4179
City Honolulu	State HI	Zip Code 96813	
Purpose of Disbursement Rent - Campaign HQ		Category/ Type 001	
Candidate Name Will Espero			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: HI	District: 01		

Full Name (Last, First, Middle Initial) c. Kamehameha Schools			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 67 S King Street #200			Amount of Each Disbursement this Period 2675.00 Transaction ID : SB17.4180
City Honolulu	State HI	Zip Code 96813	
Purpose of Disbursement Kamehameha Schools		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	8025.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 17	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Espero for Congress

Full Name (Last, First, Middle Initial) A. NGP		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2014
Mailing Address 1101 15th Street NW Suite 500		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.4182
City Washington State DC Zip Code 20005	Purpose of Disbursement Database Services Category/Type 001	
Candidate Name Espero for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: HI District: 01		

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 94-245 Leoku Street		Amount of Each Disbursement this Period 1025.00 Transaction ID : SB17.4191
City Waipahu State HI Zip Code 96797	Purpose of Disbursement Postage Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Vistaprint		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2014
Mailing Address 95 Hayden Avenue Lexington		Amount of Each Disbursement this Period 1620.43 Transaction ID : SB17.4190
City Lexington State MA Zip Code 02421	Purpose of Disbursement Printing Services Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4645.43
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 17			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Espero for Congress

Full Name (Last, First, Middle Initial) A. Vistaprint		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 95 Hayden Avenue Lexington		Amount of Each Disbursement this Period 1452.00
City Lexington State MA Zip Code 02421	Purpose of Disbursement Printing Services Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.4198
State: District:		

Full Name (Last, First, Middle Initial) B. Walmart		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 94-595 Kupuohi Street		Amount of Each Disbursement this Period 201.30
City Waipahu State HI Zip Code 96707	Purpose of Disbursement Office Supplies Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.4184
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement 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:		

SUBTOTAL of Disbursements This Page (optional).....	1653.30
TOTAL This Period (last page this line number only).....	16633.21