FEC FORM 1

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STATEMENT OF FEC MAIL CENTER **ORGANIZATION** Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) niversity of Hawaii Professional Assembly ADDRESS (number and street) (Check if address 96814 onolulu is changed) CITY STATE ZIP CODE COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) (Check if address is changed) LINDINGER COMPLEXION COMMITTEE'S WEB PAGE ADDRESS (URL) Bridger of Contract (Check if address is changed) 2. DATE FEC IDENTIFICATION NUMBER 4. IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Lynne R. Wilkens Type or Print Name of Treasurer . . Date Signature of Treasurer 「A.A.」 「NEEP Men 小也 NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. man to a learning for Office For further information contact: FEC FORM 1

Use Only

Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

(Revised 02/2009)

}	F	EC For	rm 1 (Revised 02/2009)	Page 2
5.		didate	OMMITTEE Committae: This committee is a principal campaign committee. (Complete the candidate information below.) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete information below.)	ete the candidate
	Candi Candi Party		on Sought: House Senate President	State District
	(c) Name Candi		This committee supports/opposes only one candidate, and is NOT an authorized committee.	!!!!!!
	Part (d)	y Com	n '' ' '' '' '' '' '' '' '' '' '' '' ''	emocratic, epublican, etc.) Party.
	Polit (e)	cical A		ected organization is a Labor Organization Cooperative
	(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segrecommittee. (i.e., nonconnected committee) In addition, this committee is a Lobbyist/Registrant PAC. In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	regated fund or party
	Joint	Fund	Iraising Representative:	Primarila III ayan da Marayan da yana da kasan d
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
,	(h)	Com	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
		1.	mittees Participating in Joint Fundraiser	
		2.	FEC ID number C	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~

FEC ID number C

FEC ID number C

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FEC	Form	7 (1	Hevise	d 02/	2009

Write or Type Committee Nam			
University of H	lawaii Professional A	Assembly	
6. Name of Any Connected	Organization, Affiliated Committee, Jöint	Fundraising Representative, o	r Leadership PAC Sponsor
		111111111	
		<u> </u>	
Mailing Address			
Mailing Address		111111111	
		<u> </u>	1 1 1
	CITY	STATE	ZIP CODE
		7	<u>г</u>
Relationship: Connecte	ed Organization Affiliated Committee	Joint Fundraising Representative	Leadership PAC Sponsor
To Australian 1 December 1		antinanth and another of the	
 Custodian of Records: Ide books and records. 	entify by name, address (phone number o	pplional) and position of the pers	son in possession of committee
_			
Full Name			
Mailing Address			
		ليا ليسب	
Title or Position	CITY	STATE	ZIP CODE
1	1	ı	
		Telephone number	<u> </u>
Treasurer: List the name are any designated agent (e.g.,	nd address (phone number optional) of the assistant treasurer).	ne treasurer of the committee; a	nd the name and address of
Full Name of Treasurer	e R. Wilkens		
Mailing Address	c/o UHPA		
	1017 Palm Dr		
	Honolulu	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	96814
Title or Position	CITY	STATE	ZIP CODE
Treasurer		Telephone number 1808	5932157

			_
•	FEC Form	1 (Revised 02/2009)	Page 4
	Full Name of Designated Agent		
	Mailing Address		ليتيين
		CITY STATE	ZIP CODE
	Title or Position		
		Telephone number	<u> </u>
,	Banks or Other D safety deposit boxe Name of Bank, De	depositories: List all banks or other depositories in which the committee deposits funds, holds as or maintains funds. Spository, etc.	accounts, rents
	L		
	Mailing Address		
		CITY STATE	ZIP CODE
	Name of Bank, De	pository, etc.	
	L		
	Mailing Address		
		CITY STATE	ZIP CODE

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HONOLULU

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

UNIVERSITY OF HAWAII
PROFESSIONAL ASSEMBLY
1017 Palm Drive
Honolulu, Hawaii 96814-1928



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