

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

State of Hawaii Organization of Police Officers (SHOPO Political Action Fund)

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

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|--|--|
| 6. (a) Cash on Hand January 1, <input type="text" value="2020"/> | <input type="text" value="183148.43"/> | <input type="text" value="183148.43"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="189861.46"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="4128.01"/> | <input type="text" value="49841.04"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="193989.47"/> | <input type="text" value="232989.47"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="57400.00"/> | <input type="text" value="96400.00"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="136589.47"/> | <input type="text" value="136589.47"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="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

State of Hawaii Organization of Police Officers (SHOPO Political Action Fund)

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

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 0.00 | 0.00 |
| (ii) Unitemized | 4124.75 | 12298.25 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 4124.75 | 12298.25 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 4124.75 | 12298.25 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 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)..... | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 3.26 | 37542.79 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶ | 4128.01 | 49841.04 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 4128.01 | 49841.04 |

DETAILED SUMMARY PAGE
of Disbursements

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 0.00 | 1000.00 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 0.00 | 1000.00 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 4000.00 | 4000.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements (Including Non-Federal Donations)..... | 53400.00 | 91400.00 |
| 30. Federal Election Activity (52 U.S.C. § 30101(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 57400.00 | 96400.00 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 57400.00 | 96400.00 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| III. Net Contributions/ Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 4124.75 | 12298.25 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 4124.75 | 12298.25 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 0.00 | 1000.00 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 0.00 | 1000.00 |

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

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

NAME OF COMMITTEE (In Full)

State of Hawaii Organization of Police Officers (SHOPO Political Action Fund)

Full Name (Last, First, Middle Initial)

A. KAHELE FOR CONGRESS

Mailing Address P.O. BOX 4952

City
HILO

State
HI

Zip Code
96720

Purpose of Disbursement
US House of Representative

Candidate Name

Office Sought: House
 Senate
 President
State: HI District: 02

Disbursement For: 2020
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y
09 / 28 / 2020

FEC Identification Number

C C00694604

Transaction ID : SB23.4954

Amount of Each Disbursement this Period

4000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

4000.00

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

4000.00

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

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NAME OF COMMITTEE (In Full)
State of Hawaii Organization of Police Officers (SHOPO Political Action Fund)

A. Alcos 111, David, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 2027

City Ewa Beach State HI Zip Code 96706

Purpose of Disbursement Local Election - State House of Rep Dist 41

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB29.4937

Amount of Each Disbursement this Period: 2000.00

Memo Item

B. Carvalho, Bernard, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O.Box 3510

City Lihue State HI Zip Code 96766

Purpose of Disbursement Local Election - Kauai County Council

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: HI District:

Date of Disbursement: 08 / 25 / 2020

FEC Identification Number: C

Transaction ID : SB29.4934

Amount of Each Disbursement this Period: 2000.00

Memo Item

C. Chong, Doni, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 111 Hekili Street A415

City Kailua State HI Zip Code 96734

Purpose of Disbursement Local Election - Honolulu State House Dist 51

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 14 / 2020

FEC Identification Number: C

Transaction ID : SB29.4902

Amount of Each Disbursement this Period: 2000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 6000.00

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

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NAME OF COMMITTEE (In Full)

State of Hawaii Organization of Police Officers (SHOPO Political Action Fund)

Full Name (Last, First, Middle Initial)

A. Cook, Thomas, , ,

Mailing Address P.O. Box 189

City
Kihei

State
HI

Zip Code
96753

Purpose of Disbursement
Local Election - South Maui County Council

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | | 1 | 5 | | 2 | 0 | 2 | 0 |

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.4908

Amount of Each Disbursement this Period

[REDACTED] 2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Crivello, Stacy, Helm, ,

Mailing Address P.O. Box 1097

City
Kaunakakai

State
HI

Zip Code
96748

Purpose of Disbursement
Local Election - Molokai County Council

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify)

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | | 1 | 5 | | 2 | 0 | 2 | 0 |

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.4905

Amount of Each Disbursement this Period

[REDACTED] 2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Decoite, Lynn, , ,

Mailing Address P.O. Box 52

City
Kaunakakai

State
HI

Zip Code
96748

Purpose of Disbursement
Local Election - Maui State of Rep Dist 15

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | | 2 | 2 | | 2 | 0 | 2 | 0 |

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.4927

Amount of Each Disbursement this Period

[REDACTED] 1850.00

Memo Item

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

[REDACTED] 5850.00

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

[REDACTED]

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

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NAME OF COMMITTEE (In Full)

State of Hawaii Organization of Police Officers (SHOPO Political Action Fund)

Full Name (Last, First, Middle Initial)

A. Har, Sharon, , ,

Mailing Address P.O.Box 101

City
Kapolei

State
ID

Zip Code
96707

Purpose of Disbursement
Local Election - State Hse of Rep Dist 42

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: HI District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 22 / 2020

FEC Identification Number

C []

Transaction ID : SB29.4928

Amount of Each Disbursement this Period

[] 1850.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Hui, Daniel, , ,

Mailing Address 1461 N. School Street

City
Honolulu

State
HI

Zip Code
96817

Purpose of Disbursement
Local Election - Honolulu State House of Rep Dist 29

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 15 / 2020

FEC Identification Number

C []

Transaction ID : SB29.4920

Amount of Each Disbursement this Period

[] 2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Kama, Tasha, , ,

Mailing Address P.O. Box 503

City
Wailuku

State
HI

Zip Code
96793

Purpose of Disbursement
Local Election - Maui County Council

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 15 / 2020

FEC Identification Number

C []

Transaction ID : SB29.4906

Amount of Each Disbursement this Period

[] 2000.00

Memo Item

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

[] 5850.00

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

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NAME OF COMMITTEE (In Full)

State of Hawaii Organization of Police Officers (SHOPO Political Action Fund)

Full Name (Last, First, Middle Initial)

A. Kaneshiro, Arryl, , ,

Mailing Address 4550 Ehiku Street

City Lihue State HI Zip Code 96766

Purpose of Disbursement Local Election - Kauai County Council

Category/Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2020 Primary General Other (specify) ▼
 State: HI District:

Date of Disbursement
 M M / D D / Y Y Y Y Y Y
 07 / 15 / 2020

FEC Identification Number

Transaction ID : SB29.4910
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Kim-Marshall, Kristina, , ,

Mailing Address P.O. Box 291

City Waimanalo State HI Zip Code 96795

Purpose of Disbursement Local Election - State Senate - Dist 25

Category/Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2020 Primary General Other (specify) ▼
 State: District:

Date of Disbursement
 M M / D D / Y Y Y Y Y Y
 09 / 01 / 2020

FEC Identification Number

Transaction ID : SB29.4935
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Kitashima, kelly, , ,

Mailing Address P.O. Box 2791

City Aiea State HI Zip Code 96701

Purpose of Disbursement

Category/Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2020 Primary General Other (specify) ▼
 State: District:

Date of Disbursement
 M M / D D / Y Y Y Y Y Y
 09 / 28 / 2020

FEC Identification Number

Transaction ID : SB29.4939
 Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

State of Hawaii Organization of Police Officers (SHOPO Political Action Fund)

Full Name (Last, First, Middle Initial)

A. Kong, Sam, , ,

Mailing Address 98-818 F. Kaonohi Street

City Anahola State HI Zip Code 96701

Purpose of Disbursement Local Election - State Hse of Rep - Dist 33

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: District:

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 22 / 2020

FEC Identification Number

C
Transaction ID : SB29.4926
Amount of Each Disbursement this Period
1850.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Kualii, Kipukai, , ,

Mailing Address P.O. Box 30910

City Anahola State HI Zip Code 96703

Purpose of Disbursement Local Election - Kauai County Council

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: District:

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 25 / 2020

FEC Identification Number

C
Transaction ID : SB29.4933
Amount of Each Disbursement this Period
2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. McDermott, Bob, , ,

Mailing Address 91-982 Ololani Street

City Ewa Beach State HI Zip Code 96706

Purpose of Disbursement Local Election - Honolulu -State of Rep Ewa Dist 40

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: HI District:

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2020

FEC Identification Number

C
Transaction ID : SB29.4915
Amount of Each Disbursement this Period
2000.00

Memo Item

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

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

5850.00

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

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NAME OF COMMITTEE (In Full)

State of Hawaii Organization of Police Officers (SHOPO Political Action Fund)

Full Name (Last, First, Middle Initial)

A. Molina, Mike, , ,

Mailing Address P.O. Box 1303

City
Makawao

State
HI

Zip Code
96768

Purpose of Disbursement
Local Election- Maui County Council - Haiku

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 | | | | 1 | 5 | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.4904

Amount of Each Disbursement this Period

[REDACTED] 2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Morrison, Bethany, , ,

Mailing Address P.O. Box 32

City
Laupahoehoe

State
HI

Zip Code
96764

Purpose of Disbursement
Local Election - Hawaii Council Dist 1

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify)

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 | | | | 2 | 2 | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.4929

Amount of Each Disbursement this Period

[REDACTED] 2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Okimoto, Val, , ,

Mailing Address P.O. Box 894045

City
Mililani

State
HI

Zip Code
96789

Purpose of Disbursement
Local Election - Honolulu State House of Rep Dist 36

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 | | | | 1 | 5 | | 2 | 0 | 2 | 0 | | |

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.4913

Amount of Each Disbursement this Period

[REDACTED] 2000.00

Memo Item

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

[REDACTED] 6000.00

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

[REDACTED]

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

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NAME OF COMMITTEE (In Full)

State of Hawaii Organization of Police Officers (SHOPO Political Action Fund)

Full Name (Last, First, Middle Initial)

A. Quinlan, Sean, , ,

Mailing Address 66-496 Paalaa Road # D

City Haleiwa State HI Zip Code 96712

Purpose of Disbursement Local Election - Honolulu State Hse Rep Dist 47

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2020
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2020

FEC Identification Number

C []

Transaction ID : SB29.4922

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Rodenhurst, Ikaika, , ,

Mailing Address P.O. Box 201

City Honolulu State HI Zip Code 96760

Purpose of Disbursement Local Election - Hawaii Council Dist 5

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2020
 Primary General
 Other (specify)

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 22 / 2020

FEC Identification Number

C []

Transaction ID : SB29.4931

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Todd, Chris, Toshiro, ,

Mailing Address 96 Kekela Street

City Hilo State HI Zip Code 96720

Purpose of Disbursement Local Election - Honolulu State Hse of Rep Dist 2

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2020
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2020

FEC Identification Number

C []

Transaction ID : SB29.4917

Amount of Each Disbursement this Period

2000.00

Memo Item

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

6000.00

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

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NAME OF COMMITTEE (In Full)

State of Hawaii Organization of Police Officers (SHOPO Political Action Fund)

Full Name (Last, First, Middle Initial)

A. Tokioka, Kunane, , ,

Mailing Address 2512 Kanio Road

City Lihue State HI Zip Code 96766

Purpose of Disbursement Local Election- Kauai State Hse of Rep Dist 15

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2020 Primary General Other (specify) ▼
 State: District:

011
Category/Type

Date of Disbursement
MM / DD / YYYY
07 / 22 / 2020

FEC Identification Number
C
Transaction ID : SB29.4925
Amount of Each Disbursement this Period
1850.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Turbin, Derek, , ,

Mailing Address P.O. Box 2493

City Honolulu State HI Zip Code 96804

Purpose of Disbursement Local Election - Honolulu State of Rep Dist 20

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2020 Primary General Other (specify) ▼
 State: District:

011
Category/Type

Date of Disbursement
MM / DD / YYYY
07 / 15 / 2020

FEC Identification Number
C
Transaction ID : SB29.4911
Amount of Each Disbursement this Period
2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Ward, Gene, , ,

Mailing Address 875 Puumao Street

City Honolulu State HI Zip Code 96825

Purpose of Disbursement Local Election - Honolulu State House Rep

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2020 Primary General Other (specify) ▼
 State: District:

011
Category/Type

Date of Disbursement
MM / DD / YYYY
07 / 15 / 2020

FEC Identification Number
C
Transaction ID : SB29.4916
Amount of Each Disbursement this Period
2000.00

Memo Item

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

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

5850.00

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

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NAME OF COMMITTEE (In Full)
State of Hawaii Organization of Police Officers (SHOPO Political Action Fund)

A. Ward, Gene, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 875 Puumao Street

City Honolulu State HI Zip Code 96825

Purpose of Disbursement Local Election - Honolulu State House of Rep

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB29.4919

Amount of Each Disbursement this Period: 2000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

| | |
|--|----------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 2000.00 |
| TOTAL This Period (last page this line number only).....▶ | 53400.00 |