

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 1
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) WORKING FAMILIES FOR HAWAII			FEC IDENTIFICATION NUMBER ▼ C C00490193		
Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name (Last, First, Middle Initial) of Payee HENDRIX MIYASAKI SHIN ADVERTISING			Date M M / D D / Y Y Y Y Y Y 07 / 03 / 2012		
Mailing Address 1580 MAKALOA STREET SUITE 945			Amount 35600.00		
City HONOLULU State HI Zip Code 96814		Transaction ID : SE.4189			
Purpose of Expenditure RADIO SPOTS		Category/Type 004		Office Sought: ☐ House State: HI ☒ Senate District: _____ ☐ President	
Name of Federal Candidate Supported or Opposed by Expenditure: MAZIE K HIRONO				Check One: ☒ Support ☐ Oppose	
Calendar Year-To-Date Per Election for Office Sought 35600.00			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) _____		
Full Name (Last, First, Middle Initial) of Payee			Date M M / D D / Y Y Y Y Y Y		
Mailing Address			Amount 		
City State Zip Code		Office Sought: ☐ House State: _____ ☐ Senate District: _____ ☐ President			
Purpose of Expenditure		Category/Type		Check One: ☐ Support ☐ Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure:				Disbursement For: ☐ Primary ☐ General ☐ Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought 					
(a) SUBTOTAL of Itemized Independent Expenditures..... 35600.00 (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... 35600.00					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Guy Fujimura [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 07 / 03 / 2012 Signature _____					