

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Hawaii PAC

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="2018"/>	<input type="text" value="32860.30"/>	<input type="text" value="32860.30"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="63751.81"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="71600.00"/>	<input type="text" value="136775.00"/>
(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="135351.81"/>	<input type="text" value="169635.30"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="96117.71"/>	<input type="text" value="130401.20"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="39234.10"/>	<input type="text" value="39234.10"/>
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

Hawaii PAC

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).....	10100.00	21600.00
(ii) Unitemized	0.00	175.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	10100.00	21775.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	58500.00	112000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	68600.00	133775.00
12. Transfers From Affiliated/Other Party Committees.....	3000.00	3000.00
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.).....	0.00	0.00
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)).....▶	71600.00	136775.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	71600.00	136775.00

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	25867.71	55151.20
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	25867.71	55151.20
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	70250.00	75250.00
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).....	0.00	0.00
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)) ..	96117.71	130401.20
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	96117.71	130401.20

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)	68600.00	133775.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	68600.00	133775.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	25867.71	55151.20
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	25867.71	55151.20

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
Hawaii PAC

A. Wiley Rein LLP
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1776 K St NW
 City Washington State DC Zip Code 20006-2304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2018
Transaction ID : VN8EMGVZRB2
 Amount of Each Receipt this Period
 1100.00
 Memo Item
 PARTNERSHIP--partners below if itemized

B. Weinberg, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1775 K St NW
 City Washington State DC Zip Code 20006-1228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Wiley Rein LLP Partner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2018
Transaction ID : VN8EMGVZRC0
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Buscher, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 Russell Rd
 City Alexandria State VA Zip Code 22301-2437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Forbes Tate Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 30 / 2018
Transaction ID : VN8EMH1A9C5
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 * Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....	3600.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 27
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)
Hawaii PAC

A. ACTBLUE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238-2110
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual) Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2018
Transaction ID : VN8EMH1A9C5E

Amount of Each Receipt this Period
2500.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Comly, Renee, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8921 Woodward Rd

City Marshall	State VA	Zip Code 20115-3310
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
W2E Ventures Inc. CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 16 / 2018
Transaction ID : VN8EMGZ8X28

Amount of Each Receipt this Period
5000.00

Memo Item

* Earmarked Contribution: See Below

C. ACTBLUE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238-2110
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual) Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
7500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 18 / 2018
Transaction ID : VN8EMGZ8X28E

Amount of Each Receipt this Period
5000.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 8 OF 27
(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"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Hawaii PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Goodfriend, David, , ,

Mailing Address 7713 Oldchester Rd

City Bethesda	State MD	Zip Code 20817-6277
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) The Goodfriend Group	Occupation (for Individual) President
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	12	/	2018

Transaction ID : VN8EMGVZEH8

Amount of Each Receipt this Period
1500.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	10100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 27
<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)
Hawaii PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. National Air Traffic Controllers Association PAC		Date of Receipt
Mailing Address 1325 Massachusetts Ave NW		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2018"/>
City Washington	State DC	Zip Code 20005-4171
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00238725"/>		Transaction ID : VN8EMH0SA80
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>		<input type="checkbox"/> Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Chugach Alaska Corporation PAC		Date of Receipt
Mailing Address 3800 Centerpoint Dr Ste 1200		<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2018"/>
City Anchorage	State AK	Zip Code 99503-5825
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00564377"/>		Transaction ID : VN8EMGVZEG0
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>		<input type="checkbox"/> Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. T-Mobile PAC		Date of Receipt
Mailing Address 601 Pennsylvania Ave NW Ste 800 N Bldg		<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2018"/>
City Washington	State DC	Zip Code 20004-2601
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00361758"/>		Transaction ID : VN8EMGV7NW0
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>		<input type="checkbox"/> Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="10000.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 27
<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)
Hawaii PAC

A. National Cable And Telecommunications Association PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 25 Massachusetts Ave NW
Ste 100

City Washington State DC Zip Code 20001-1434

FEC ID number of contributing federal political committee. **C** C00010082

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
03 / 20 / 2018

Transaction ID : VN8EMGXFX0

Amount of Each Receipt this Period
5000.00

Memo Item

B. CSX Corporation Good Government Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1331 Pennsylvania Ave NW
Ste 560 South

City Washington State DC Zip Code 20004-1710

FEC ID number of contributing federal political committee. **C** C00163832

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
03 / 15 / 2018

Transaction ID : VN8EMGXWCW1

Amount of Each Receipt this Period
2500.00

Memo Item

C. THE COUNCIL OF INSURANCE AGENTS & BROKERS POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 701 Pennsylvania Ave NW
Ste 750

City Washington State DC Zip Code 20004-2661

FEC ID number of contributing federal political committee. **C** C00039578

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
03 / 28 / 2018

Transaction ID : VN8EMH0SA72

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 12500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 27
<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)
Hawaii PAC

A. BNSF Railway Company RailPAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 961039

City Fort Worth	State TX	Zip Code 76161-0039
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FEC ID number of contributing federal political committee. **C** C00235739

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03	/	29	/	2018

Transaction ID : VN8EMH0SAC2

Amount of Each Receipt this Period
5000.00

Memo Item

B. Union Pacific Corporation Fund For Effective Government

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 700 13Th St NW Ste 350

City Washington	State DC	Zip Code 20005-6621
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FEC ID number of contributing federal political committee. **C** C00010470

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03	/	12	/	2018

Transaction ID : VN8EMGVZEM2

Amount of Each Receipt this Period
5000.00

Memo Item

C. Association Of American Railroads PAC (RAILPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 425 3Rd St SW Ste 1000

City Washington	State DC	Zip Code 20024-3228
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FEC ID number of contributing federal political committee. **C** C00280743

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03	/	29	/	2018

Transaction ID : VN8EMH0SAB4

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	11000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 27
<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)
Hawaii PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Comcast Corporation & NBC Universal PAC		Date of Receipt
Mailing Address 1701 John F Kennedy Blvd		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2018"/>
City Philadelphia	State PA	Zip Code 19103-2856
FEC ID number of contributing federal political committee. C C00248716		Transaction ID : VN8EMH0SA56
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Echostar Corporation And Dish Network Corporation PAC		Date of Receipt
Mailing Address 1110 Vermont Ave NW Ste 750		<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2018"/>
City Washington	State DC	Zip Code 20005-6322
FEC ID number of contributing federal political committee. C C00330647		Transaction ID : VN8EMGVZEJ6
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. National Association Of Broadcasters PAC		Date of Receipt
Mailing Address 1771 N St NW		<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2018"/>
City Washington	State DC	Zip Code 20036-2800
FEC ID number of contributing federal political committee. C C00009985		Transaction ID : VN8EMGXZFZ6
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="15000.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 27
<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)
Hawaii PAC

A. AT&T, Inc. Federal PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 208 S Akard St
Ste 2701

City Dallas State TX Zip Code 75202-4206

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 28 / 2018

Transaction ID : VN8EMH0SA98

Amount of Each Receipt this Period
5000.00

Memo Item

B. American Hotel And Lodging Association PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1250 I St NW
Ste 1100

City Washington State DC Zip Code 20005-5904

FEC ID number of contributing federal political committee. **C** C00001198

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 29 / 2018

Transaction ID : VN8EMH0SAD9

Amount of Each Receipt this Period
5000.00

Memo Item

C.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	58500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 27
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Hawaii PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Hawaii Senate Victory Fund

Mailing Address 918 Pennsylvania Ave SE

City Washington	State DC	Zip Code 20003-2140
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00568873

Name of Employer (for Individual)	Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	28	/	2018

Transaction ID : VN8EMH01TJ6

Amount of Each Receipt this Period
3000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Martinez, Brett, , ,

Mailing Address 4561 Fable Ct

City Santa Rosa	State CA	Zip Code 95404-6253
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Redwood Credit Union	Occupation (for Individual) President & CEO
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	12	/	2018

Transaction ID : VN8EMH01TN0

Amount of Each Receipt this Period
500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Kirby, Kathleen, , ,

Mailing Address 1367 New Bedford Ln

City Reston	State VA	Zip Code 20194-1317
----------------	-------------	------------------------

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

Name of Employer (for Individual) Wiley Rein LLP	Occupation (for Individual) Attorney
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	11	/	2018

Transaction ID : VN8EMH01TT0

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 27
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Hawaii PAC

A. Gupta Jindal, Sonhi, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9300 Ivy Tree Ln
 City Great Falls State VA Zip Code 22066-2206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 20 / 2018
Transaction ID : VN8EMH01TY1
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Huther, Christopher, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1776 K St NW
 City Washington State DC Zip Code 20006-2304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Wiley Rein Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 12 / 2018
Transaction ID : VN8EMH01TM2
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Shields, Peter, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1776 K St NW
 City Washington State DC Zip Code 20006-2304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Wiley Rein LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 11 / 2018
Transaction ID : VN8EMH01TS2
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 27
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Hawaii PAC

A. INTELSAT CORPORATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7900 Tysons One Pl
Ste 12

City McLean State VA Zip Code 22102-5979

FEC ID number of contributing federal political committee. **C** C00412403

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 20 / 2018

Transaction ID : VN8EMH01TX3

Amount of Each Receipt this Period
500.00

Memo Item

B. Stroup, Tom, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 313 Springvale Rd

City Great Falls State VA Zip Code 22066-3212

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

Name of Employer (for Individual) Occupation (for Individual)
Satellite Industry Association CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 11 / 2018

Transaction ID : VN8EMH01TR4

Amount of Each Receipt this Period
500.00

Memo Item

C. American Health Care Association PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1201 L St NW

City Washington State DC Zip Code 20005-4024

FEC ID number of contributing federal political committee. **C** C00006080

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 19 / 2018

Transaction ID : VN8EMH01TW5

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 27
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Hawaii PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Cheney, Bill, , ,		Date of Receipt MM / DD / YYYY 03 / 11 / 2018
Mailing Address 2102 N Heliotrope Dr		Transaction ID : VN8EMH01TQ6
City Santa Ana	State CA	Zip Code 92706-2542
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Schools First FCU	Occupation (for Individual) CEO	<input checked="" type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Hook, Lisa, , ,		Date of Receipt MM / DD / YYYY 03 / 11 / 2018
Mailing Address 111 Crandon Blvd Apt B-806		Transaction ID : VN8EMH01TV7
City Key Biscayne	State FL	Zip Code 33149
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Neustar	Occupation (for Individual) President & CEO	<input checked="" type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Dyksiva, Diana, , ,		Date of Receipt MM / DD / YYYY 03 / 11 / 2018
Mailing Address 2244 N La Paz Dr		Transaction ID : VN8EMH01TP8
City Claremont	State CA	Zip Code 91711-1737
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) California Credit Union League	Occupation (for Individual) Finance	<input checked="" type="checkbox"/> Memo Item
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).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 27
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Hawaii PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Alexander, Stacey, , ,

Mailing Address 4203 Bradley Ln

City Chevy Chase	State MD	Zip Code 20815-5234
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Subject Matter	Occupation (for Individual) Consultant
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	25	/	2018

Transaction ID : VN8EMH01TZ9

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	3000.00

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Hawaii PAC

Full Name (Last, First, Middle Initial)

A. Business Card Services

Mailing Address PO Box 23066

City
Columbus

State
GA

Zip Code
31902-3066

Purpose of Disbursement
Credit Card Payment, Below if itemized

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5					2018

FEC Identification Number

C [REDACTED]

Transaction ID : VN7FCAA4R1

Amount of Each Disbursement this Period

[REDACTED] 9381.08

Memo Item

Full Name (Last, First, Middle Initial)

B. Florist Grand

Mailing Address 1020 Auahi St
Ste 4110

City
Honolulu

State
HI

Zip Code
96814-4161

Purpose of Disbursement
Flowers for PAC event

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5					2018

FEC Identification Number

C [REDACTED]

Transaction ID : VN7FCAA4R1

Amount of Each Disbursement this Period

[REDACTED] 2235.60

Memo Item

Full Name (Last, First, Middle Initial)

C. Halekulani Hotel

Mailing Address 2199 Kalia Rd

City
Honolulu

State
HI

Zip Code
96815-1936

Purpose of Disbursement
Catering for PAC event

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5					2018

FEC Identification Number

C [REDACTED]

Transaction ID : VN7FCAA4R1

Amount of Each Disbursement this Period

[REDACTED] 7127.01

Memo Item

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

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

[REDACTED] 9381.08

[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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Hawaii PAC

Full Name (Last, First, Middle Initial) A. Actblue Technical Services		Date of Disbursement MM / DD / YYYY 03 / 31 / 2018
Mailing Address 366 Summer St		FEC Identification Number C Transaction ID : VN7FCAA5R Amount of Each Disbursement this Period 98.75
City Somerville	State MA	
Zip Code 02144-3132		Memo Item <input type="checkbox"/>
Purpose of Disbursement Merchant Fees		
Candidate Name		Category/Type
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: _____	

Full Name (Last, First, Middle Initial) B. O'Beirne, Max, , ,		Date of Disbursement MM / DD / YYYY 03 / 15 / 2018
Mailing Address 220 I St NE Ste 110		FEC Identification Number C Transaction ID : VN7FCAA4R Amount of Each Disbursement this Period 283.18
City Washington	State DC	
Zip Code 20002-4365		Memo Item <input type="checkbox"/>
Purpose of Disbursement Reimburse Travel, below if itemized		
Candidate Name		Category/Type
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: _____	

Full Name (Last, First, Middle Initial) C. Kusumoto, Kristy, T., ,		Date of Disbursement MM / DD / YYYY 03 / 22 / 2018
Mailing Address 1515 Ala Hahanui St		FEC Identification Number C Transaction ID : VN7FCAA4S Amount of Each Disbursement this Period 1357.95
City Honolulu	State HI	
Zip Code 96818-1502		Memo Item <input type="checkbox"/>
Purpose of Disbursement Reimburse Supplies, below if itemized		
Candidate Name		Category/Type
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)..... ▶

1739.88

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"/> 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)
Hawaii PAC

Full Name (Last, First, Middle Initial)
A. Hawaiian Chip Company

Mailing Address 1928 Republican St

City Honolulu State HI Zip Code 96819-2205

Purpose of Disbursement
Supplies for PAC event

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		22		2018

FEC Identification Number

C [Redacted]
Transaction ID : VN7FCAA4S1
Amount of Each Disbursement this Period
[Redacted] 220.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Delta Services

Mailing Address 644 Iana St

City Kailua State HI Zip Code 96734-3409

Purpose of Disbursement
Supplies for PAC event

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		22		2018

FEC Identification Number

C [Redacted]
Transaction ID : VN7FCAA4S2
Amount of Each Disbursement this Period
[Redacted] 944.35

Memo Item

Full Name (Last, First, Middle Initial)
C. Capitol Compliance Associates

Mailing Address PO Box 15293

City Washington State DC Zip Code 20003-0293

Purpose of Disbursement
Reimburse Catering & Software, below if itemized

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		09		2018

FEC Identification Number

C [Redacted]
Transaction ID : VN7FCAA4R
Amount of Each Disbursement this Period
[Redacted] 5967.56

Memo Item

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

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

[Redacted]	5967.56
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[Redacted]	
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**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"/> 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)

Hawaii PAC

Full Name (Last, First, Middle Initial)

A. The Kahala Hotel & Resort

Mailing Address 5000 Kahala Ave

City
Honolulu

State
HI

Zip Code
96816-5411

Purpose of Disbursement
Catering for PAC event

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	1	8

FEC Identification Number

C

Transaction ID : VN7FCAA4RI

Amount of Each Disbursement this Period

5951.71

Memo Item

Full Name (Last, First, Middle Initial)

B. LaFave, Lori, B., ,

Mailing Address 200 E Jefferson St

City
Falls Church

State
VA

Zip Code
22046-3531

Purpose of Disbursement
Fundraising Consulting Services for PAC (no federal candidates)

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	1	8

FEC Identification Number

C

Transaction ID : VN7FCAA4RI

Amount of Each Disbursement this Period

6000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. NGP VAN, Inc

Mailing Address 1101 15Th St NW
Ste 500

City
Washington

State
DC

Zip Code
20005-5006

Purpose of Disbursement
Software

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	1	8

FEC Identification Number

C

Transaction ID : VN7FCAA4RI

Amount of Each Disbursement this Period

975.00

Memo Item

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

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

6975.00

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Hawaii PAC

Full Name (Last, First, Middle Initial) A. Actblue Technical Services		Date of Disbursement MM / DD / YYYY 03 / 18 / 2018	
Mailing Address 366 Summer St		FEC Identification Number C [] Transaction ID : VN7FCAA40P Amount of Each Disbursement this Period [] 197.50	
City Somerville	State MA	Zip Code 02144-3132	Category/ Type []
Purpose of Disbursement Merchant Fees		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Capitol Compliance Associates		Date of Disbursement MM / DD / YYYY 03 / 09 / 2018	
Mailing Address PO Box 15293		FEC Identification Number C [] Transaction ID : VN7FCAA4RM Amount of Each Disbursement this Period [] 1500.00	
City Washington	State DC	Zip Code 20003-0293	Category/ Type []
Purpose of Disbursement Compliance Services		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY [] / [] / []	
Mailing Address		FEC Identification Number C [] Amount of Each Disbursement this Period []	
City	State	Zip Code	Category/ Type []
Purpose of Disbursement		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 1697.50
TOTAL This Period (last page this line number only).....▶	[] 25761.02

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

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<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

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NAME OF COMMITTEE (In Full)
Hawaii PAC

Full Name (Last, First, Middle Initial) A. BEN CARDIN FOR SENATE, INC.		Date of Disbursement MM / DD / YYYY 03 / 22 / 2018
Mailing Address PO Box 21093		FEC Identification Number C 000411587 Transaction ID : VN7FCAA4R Amount of Each Disbursement this Period 2500.00
City Catonsville	State MD	Zip Code 21228-0593
Purpose of Disbursement Contribution - Primary 2018		Category/ Type
Candidate Name CARDIN, BENJAMIN, L, ,		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MD	District: 00	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. WV STATE DEMOCRATIC EXECUTIVE COMMITTEE		Date of Disbursement MM / DD / YYYY 03 / 27 / 2018
Mailing Address PO Box 11926		FEC Identification Number C 000162578 Transaction ID : VN7FCAA4S6 Amount of Each Disbursement this Period 5000.00
City Charleston	State WV	Zip Code 25339-1926
Purpose of Disbursement 2018 Contribution		Category/ Type
Candidate Name WV STATE DEMOCRATIC EXECUTIVE COMMITTEE		
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:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. TINA SMITH FOR MINNESOTA		Date of Disbursement MM / DD / YYYY 03 / 09 / 2018
Mailing Address PO Box 14362		FEC Identification Number C 000663781 Transaction ID : VN7FCAA4R Amount of Each Disbursement this Period 5000.00
City Saint Paul	State MN	Zip Code 55114-0362
Purpose of Disbursement Contribution - General 2018		Category/ Type
Candidate Name SMITH, TINA, FLINT, ,		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MN	District: 00	<input type="checkbox"/> Memo Item

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

12500.00

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 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

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NAME OF COMMITTEE (In Full)
Hawaii PAC

Full Name (Last, First, Middle Initial)
A. BREDESEN FOR SENATE

Mailing Address 4560 Trousdale Dr
Ste 100

City Nashville State TN Zip Code 37204-4538

Purpose of Disbursement
Contribution - Primary 2018

Candidate Name
BREDESEN, PHILIP, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: TN District: 00

Date of Disbursement

MM / DD / YYYY
03 / 22 / 2018

FEC Identification Number

C C00663658

Transaction ID : VN7FCAA4R1

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)
B. FRIENDS OF CHRIS MURPHY

Mailing Address PO Box 127

City Cheshire State CT Zip Code 06410-0127

Purpose of Disbursement
Contribution - General 2018

Candidate Name
MURPHY, CHRISTOPHER S MR, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: CT District: 00

Date of Disbursement

MM / DD / YYYY
03 / 28 / 2018

FEC Identification Number

C C00492645

Transaction ID : VN7FCAA4S5

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)
C. TINA SMITH FOR MINNESOTA

Mailing Address PO Box 14362

City Saint Paul State MN Zip Code 55114-0362

Purpose of Disbursement
Contribution - Primary 2018

Candidate Name
SMITH, TINA, FLINT, ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: MN District: 00

Date of Disbursement

MM / DD / YYYY
03 / 09 / 2018

FEC Identification Number

C C00663781

Transaction ID : VN7FCAA4R

Amount of Each Disbursement this Period

5000.00

Memo Item

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

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

10000.00

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

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FOR LINE NUMBER:
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<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

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NAME OF COMMITTEE (In Full)
Hawaii PAC

Full Name (Last, First, Middle Initial) A. Democratic Senatorial Campaign Committee		Date of Disbursement MM / DD / YYYY 03 / 27 / 2018
Mailing Address 120 Maryland Ave NE		FEC Identification Number C [REDACTED] Transaction ID : VN7FCAA4S4 Amount of Each Disbursement this Period 30000.00
City Washington	State DC	Zip Code 20002-5610
Purpose of Disbursement Contribution - Building Fund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Headquarters Account	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Democratic Senatorial Campaign Committee		Date of Disbursement MM / DD / YYYY 03 / 09 / 2018
Mailing Address 120 Maryland Ave NE		FEC Identification Number C [REDACTED] Transaction ID : VN7FCAA4RC Amount of Each Disbursement this Period 10000.00
City Washington	State DC	Zip Code 20002-5610
Purpose of Disbursement 2018 Contribution		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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. HIRAL FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 15 / 2018
Mailing Address PO Box 8570 6825 SOUTH 7TH STREET		FEC Identification Number C C00649897 Transaction ID : VN7FCAA4R Amount of Each Disbursement this Period 250.00
City Phoenix	State AZ	Zip Code 85066-8570
Purpose of Disbursement Contribution - Special General		Category/ Type
Candidate Name TIPIRNENI, HIRAL, VYAS, ,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General	
State: AZ District: 08	<input type="checkbox"/> Memo Item	

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

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

40250.00
[REDACTED]

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

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<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

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NAME OF COMMITTEE (In Full)
Hawaii PAC

Full Name (Last, First, Middle Initial) A. ROSEN FOR NEVADA			Date of Disbursement MM / DD / YYYY 03 / 09 / 2018	
Mailing Address 1000 N Green Valley Pkwy # 440-177			FEC Identification Number C 00606939 Transaction ID : VN7FCAA4R	
City Henderson	State NV	Zip Code 89074-6170	Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement Contribution - General 2018			Memo Item <input type="checkbox"/>	
Candidate Name ROSEN, JACKY, , ,			Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: NV	District: 00			

Full Name (Last, First, Middle Initial) B. ROSEN FOR NEVADA			Date of Disbursement MM / DD / YYYY 03 / 09 / 2018	
Mailing Address 1000 N Green Valley Pkwy # 440-177			FEC Identification Number C 00606939 Transaction ID : VN7FCAA4R	
City Henderson	State NV	Zip Code 89074-6170	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement Contribution - Primary 2018			Memo Item <input type="checkbox"/>	
Candidate Name ROSEN, JACKY, , ,			Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: NV	District: 00			

Full Name (Last, First, Middle Initial) C.			Date of Disbursement MM / DD / YYYY	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement			Memo Item <input type="checkbox"/>	
Candidate Name			Category/Type	
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)..... ▶

7500.00

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

70250.00