

A. Form/Schedule : **F3N**

Transaction ID :

Debt/Obligation to Manoa Grand Ballroom previously reported was billed in error and the amount is not owed by the Committee.

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Abercrombie for Congress

Report Covering the Period:

From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	1000.00	13014.17
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	1000.00	13014.17
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	38863.23	184032.17
(b) Total Offsets to Operating Expenditures (from Line 14).....	308.70	3645.44
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	38554.53	180386.73
8. Cash on Hand at Close of Reporting Period (from Line 27).....	918947.99	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	19141.70	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	9309.69	

For further information contact:

Federal Election Commission
 999 E Street, NW
 Washington, DC 20463
 Toll Free 800-424-9530
 Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name
Abercrombie for Congress

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees	0.00	500.00
(i) Itemized (use Schedule A).....	0.00	504.00
(ii) Unitemized.....	0.00	1004.00
(iii) TOTAL of contributions from individuals..... ▶	0.00	10.17
(b) Political Party Committees.....	1000.00	12000.00
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	1000.00	13014.17
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	1000.00	13014.17
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	308.70	3645.44
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	205.42	4278.72
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	1514.12	20938.33

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS

**COLUMN A
Total This Period**

**COLUMN B
Election Cycle-to-Date**

17. OPERATING EXPENDITURES.....	38863.23	184032.17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	5655.23	31873.79
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	44518.46	215905.96

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	961952.33
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	1514.12
25. SUBTOTAL (add Line 23 and Line 24).....	963466.45
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	44518.46
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	918947.99

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 22
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Abercrombie for Congress

A. Full Name (Last, First, Middle Initial)
Moran for Congress

Mailing Address 311 Washington Street, Ste 200-L

City State Zip Code
Alexandria VA 22314

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 1 / 2 0 0 9

Transaction ID: 90619.C23727

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 22
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input checked="" type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Abercrombie for Congress

A.	Full Name (Last, First, Middle Initial) Fontainebleau Resort		Date of Receipt
	Mailing Address 4441 Collins Ave		<input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Miami	FL	33140-
	FEC ID number of contributing federal political committee.		Transaction ID: 90707.C23732
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2010		Election Cycle-to-Date ▼	<input type="text" value="234.87"/>
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="234.87"/>	Offsets to Operating Expenditure
			Note: Refund Hotel Charges

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="234.87"/>
TOTAL This Period (last page this line number only)	<input type="text" value="234.87"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 22
	(check only one)
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Abercrombie for Congress

A.	Full Name (Last, First, Middle Initial) First Hawaiian Bank	Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 1580 Kapiolani Blvd.	Transaction ID: 90619.C23728
	City Honolulu State HI Zip Code 96814-	Amount of Each Receipt this Period 109.31
	FEC ID number of contributing federal political committee. C	Other Receipt
	Name of Employer N/A Occupation N/A Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4182.61 Note: Interest Earned

B.	Full Name (Last, First, Middle Initial) First Hawaiian Bank	Date of Receipt MM / DD / YYYY 05 / 31 / 2009
	Mailing Address 1580 Kapiolani Blvd.	Transaction ID: 90619.C23729
	City Honolulu State HI Zip Code 96814-	Amount of Each Receipt this Period 82.47
	FEC ID number of contributing federal political committee. C	Other Receipt
	Name of Employer N/A Occupation N/A Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4265.08 Note: Interest Earned

C.	Full Name (Last, First, Middle Initial) First Hawaiian Bank	Date of Receipt MM / DD / YYYY 06 / 30 / 2009
	Mailing Address 1580 Kapiolani Blvd.	Transaction ID: 90707.C23731
	City Honolulu State HI Zip Code 96814-	Amount of Each Receipt this Period 13.64
	FEC ID number of contributing federal political committee. C	Other Receipt
	Name of Employer N/A Occupation N/A Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4278.72 Note: Interest Earned

SUBTOTAL of Receipts This Page (optional)	205.42
TOTAL This Period (last page this line number only)	205.42

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Abercrombie for Congress

A.

Full Name (Last, First, Middle Initial)
Hawaiian Host, Inc.

Transaction ID: 90704.E5018
Date of Disbursement

Mailing Address 500 Alakawa St, Suite 111

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	0	9

City Honolulu State HI Zip Code 96817-

Amount of Each Disbursement this Period

322.58

Purpose of Disbursement
Promotion-Candy

Category/ Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

PROMOTION-CANDY

B.

Full Name (Last, First, Middle Initial)
Storquest - Kakaako

Transaction ID: 90619.E5000
Date of Disbursement

Mailing Address 850 Kawaiahao Street, #4th Floor

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	0	9

City Honolulu State HI Zip Code 96813-

Amount of Each Disbursement this Period

129.01

Purpose of Disbursement
Storage Fee

Category/ Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

STORAGE FEE

C.

Full Name (Last, First, Middle Initial)
BankCard Center

Transaction ID: 90619.E5007
Date of Disbursement

Mailing Address P.O. Box 29450

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	2		2	0	0	9

City Honolulu State HI Zip Code 96820-1850

Amount of Each Disbursement this Period

302.32

Purpose of Disbursement
Credit Card Payment [See Below]

Category/ Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

CREDIT CARD PAYMENT [SEE BELOW]

SUBTOTAL of Disbursements This Page (optional)

753.91

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Abercrombie for Congress

A.	Full Name (Last, First, Middle Initial) Belga Cafe Mailing Address 514 8th Street City Washington State DC Zip Code 20003- Purpose of Disbursement Meeting - Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90619.E5008 Date of Disbursement 06 / 12 / 2009 Amount of Each Disbursement this Period 128.85 [MEMO ITEM] MEMO: MEETING - MEALS	
B.	Full Name (Last, First, Middle Initial) First Hawaiian Bank Mailing Address 1580 Kapiolani Blvd. City Honolulu State HI Zip Code 96814- Purpose of Disbursement Finance Charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90707.E5022 Date of Disbursement 06 / 12 / 2009 Amount of Each Disbursement this Period 48.52 [MEMO ITEM] MEMO: FINANCE CHARGES	
C.	Full Name (Last, First, Middle Initial) House Members Dinning Mailing Address Longworth Building City Washington State DC Zip Code 20510- Purpose of Disbursement Meals with Constituents Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90704.E5016 Date of Disbursement 06 / 12 / 2009 Amount of Each Disbursement this Period 124.95 [MEMO ITEM] MEMO: MEALS WITH CONSTITU- ENTS	

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Abercrombie for Congress

A. Full Name (Last, First, Middle Initial) Storquest - Kakaako <hr/> Mailing Address 850 Kawaiahao Street, #4th Floor <hr/> City Honolulu State HI Zip Code 96813- <hr/> Purpose of Disbursement Storage Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90619.E4995 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 9	
	Amount of Each Disbursement this Period 129.01	
	Category/ Type STORAGE FEE	
	Full Name (Last, First, Middle Initial) Perkins Coie LLP <hr/> Mailing Address 1201 Third Ave, 40th Floor <hr/> City Seattle State WA Zip Code 98101- <hr/> Purpose of Disbursement Legal Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90619.E5002 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 9
Amount of Each Disbursement this Period 9351.00		
Category/ Type LEGAL SERVICES	Full Name (Last, First, Middle Initial) Hawaiian Telcom <hr/> Mailing Address P. O. Box 30770 <hr/> City Honolulu State HI Zip Code 96820- <hr/> Purpose of Disbursement Telephone Service Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90619.E4985 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 9
Amount of Each Disbursement this Period 128.00		
Category/ Type TELEPHONE SERVICE		

SUBTOTAL of Disbursements This Page (optional) ▶	9608.01
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Abercrombie for Congress

A.	Full Name (Last, First, Middle Initial) Perkins Coie LLP	Transaction ID: 90619.E4993 Date of Disbursement MM / DD / YYYY 04 / 29 / 2009
	Mailing Address 1201 Third Ave, 40th Floor	Amount of Each Disbursement this Period 9724.32
	City Seattle State WA Zip Code 98101-	
	Purpose of Disbursement Legal Services	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		LEGAL SERVICES

B.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 90619.E4989 Date of Disbursement MM / DD / YYYY 04 / 23 / 2009
	Mailing Address P. O. Box 9622	Amount of Each Disbursement this Period 85.28
	City Mission Hills State CA Zip Code 91346-9622	
	Purpose of Disbursement Cellular Service	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CELLULAR SERVICE

C.	Full Name (Last, First, Middle Initial) Alston Hunt Floyd & Ing Lawyers	Transaction ID: 90619.E5003 Date of Disbursement MM / DD / YYYY 06 / 02 / 2009
	Mailing Address ASB Tower, 18th Floor 1001 Bishop Street	Amount of Each Disbursement this Period 5244.63
	City Honolulu State HI Zip Code 96813-	
	Purpose of Disbursement Legal Services	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		LEGAL SERVICES

SUBTOTAL of Disbursements This Page (optional)	▶	15054.23
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Abercrombie for Congress

A.

Full Name (Last, First, Middle Initial)
First Hawaiian Bank

Mailing Address 1580 Kapiolani Blvd.

City Honolulu State HI Zip Code 96814-

Purpose of Disbursement
Quarterly Analysis Fees

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: 90619.E5010
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	7	/	2	0	0	9

Amount of Each Disbursement this Period

330.87

QUARTERLY ANALYSIS FEES

B.

Full Name (Last, First, Middle Initial)
National Democratic Club

Mailing Address 30 Ivy Street, S.E.

City Washington State DC Zip Code 20003-

Purpose of Disbursement
Membership Dues/Long Distance Chg

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: 90619.E5006
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	2	/	2	0	0	9

Amount of Each Disbursement this Period

593.58

MEMBERSHIP DUES/LONG DIST-
ANCE CHG

C.

Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address P. O. Box 9622

City Mission Hills State CA Zip Code 91346-9622

Purpose of Disbursement
Cellular Service

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: 90619.E4997
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	8	/	2	0	0	9

Amount of Each Disbursement this Period

80.52

CELLULAR SERVICE

SUBTOTAL of Disbursements This Page (optional)

1004.97

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Abercrombie for Congress

A.	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address P. O. Box 9622 City Mission Hills State CA Zip Code 91346-9622 Purpose of Disbursement Cellular Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90619.E5005 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 9	Amount of Each Disbursement this Period 80.45 CELLULAR SERVICE
B.	Full Name (Last, First, Middle Initial) Perkins Coie LLP Mailing Address 1201 Third Ave, 40th Floor City Seattle State WA Zip Code 98101- Purpose of Disbursement Legal Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90619.E4998 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 9	Amount of Each Disbursement this Period 5407.15 LEGAL SERVICES
C.	Full Name (Last, First, Middle Initial) Endo & Company, LLC Mailing Address 1357 Kapiolani Blvd, #1005 City Honolulu State HI Zip Code 96814- Purpose of Disbursement Accounting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90619.E5004 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 9	Amount of Each Disbursement this Period 732.98 ACCOUNTING SERVICES

SUBTOTAL of Disbursements This Page (optional)	6220.58
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 15 / 22

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Abercrombie for Congress

<p>A. Full Name (Last, First, Middle Initial) RON/GLO & Associates</p> <p>Mailing Address P.O. Box 1521</p> <p>City Pearl City State HI Zip Code 96782-</p> <p>Purpose of Disbursement Advertising - Feb 2009 Black Histor</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90619.E4988</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center; border: 1px solid black; padding: 5px;">850.00</p> <p>ADVERTISING - FEB 2009 BLACK HISTOR</p>
<p>B. Full Name (Last, First, Middle Initial) BankCard Center</p> <p>Mailing Address P.O. Box 29450</p> <p>City Honolulu State HI Zip Code 96820-1850</p> <p>Purpose of Disbursement Credit Card Payment [See Below]</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90619.E4986</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center; border: 1px solid black; padding: 5px;">135.56</p> <p>CREDIT CARD PAYMENT [SEE BELOW]</p>
<p>C. Full Name (Last, First, Middle Initial) First Hawaiian Bank</p> <p>Mailing Address 1580 Kapiolani Blvd.</p> <p>City Honolulu State HI Zip Code 96814-</p> <p>Purpose of Disbursement Finance Charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90704.E5014</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center; border: 1px solid black; padding: 5px;">23.01</p> <p>[MEMO ITEM] MEMO: FINANCE CHARGE</p>

SUBTOTAL of Disbursements This Page (optional)	985.56
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 16 / 22

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Abercrombie for Congress

A.

Full Name (Last, First, Middle Initial)
Alston Hunt Floyd & Ing Lawyers

Transaction ID: 90704.E5017

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	0	9

Mailing Address ASB Tower, 18th Floor
1001 Bishop Street

Amount of Each Disbursement this Period

4573.92

City Honolulu State HI Zip Code 96813-

Purpose of Disbursement
Legal Services

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

LEGAL SERVICES

State: District:

B.

Full Name (Last, First, Middle Initial)
Storquest - Kakaako

Transaction ID: 90408.E4956

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	0	9

Mailing Address 850 Kawaiahao Street, #4th Floor

Amount of Each Disbursement this Period

129.01

City Honolulu State HI Zip Code 96813-

Purpose of Disbursement
Storage Fee

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

STORAGE FEE

State: District:

C.

Full Name (Last, First, Middle Initial)
Storquest - Kakaako

Transaction ID: 90408.E4955

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	0		2	0	0	9

Mailing Address 850 Kawaiahao Street, #4th Floor

Amount of Each Disbursement this Period

10.00

City Honolulu State HI Zip Code 96813-

Purpose of Disbursement
Storage fee-addl

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

STORAGE FEE-ADDL

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

4712.93

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 17 / 22

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Abercrombie for Congress

A.

Full Name (Last, First, Middle Initial)
Alston Hunt Floyd & Ing Lawyers

Transaction ID: 90619.E4990
Date of Disbursement

Mailing Address ASB Tower, 18th Floor
1001 Bishop Street

^M	^M	/	^D	^D	/	^Y	^Y	^Y	^Y
0	4		2	3		2	0	0	9

City Honolulu State HI Zip Code 96813-

Amount of Each Disbursement this Period

523.04

Purpose of Disbursement
Legal Services

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

LEGAL SERVICES

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

523.04

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

38863.23

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Abercrombie for Congress

A. Full Name (Last, First, Middle Initial)
Daihonzan Chozen-ji International Zen

Mailing Address 3565 Kalihi Street

City Honolulu State HI Zip Code 96819-

Purpose of Disbursement
CHARITABLE DONATION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 90619.E4984
Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
Domestic Violence Action Center

Mailing Address P O Box 3198

City Honolulu State HI Zip Code 96801-

Purpose of Disbursement
CHARITABLE DONATION - SPONSORSHIP

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 90619.E4996
Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
Halau O Aulani

Mailing Address 4309 Holmehurst Way West

City Bowie State MD Zip Code 20720-

Purpose of Disbursement
CHARITABLE DONATION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 90619.E4992
Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 19 / 22

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Abercrombie for Congress

A.

Full Name (Last, First, Middle Initial)
Malama Maunalua

Transaction ID: 90619.E4983
Date of Disbursement

Mailing Address P.O. Box 240421

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	0	9

City Honolulu State HI Zip Code 96824-

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
CHARITABLE DONATION

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Manoa Valley Theatre

Transaction ID: 90619.E4994
Date of Disbursement

Mailing Address 2833 E. Manoa Road

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	0	9

City Honolulu State HI Zip Code 96822-

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
CHARITABLE DONATION

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Rehabilitation Foundation of the Pacific

Transaction ID: 90619.E4999
Date of Disbursement

Mailing Address 226 North Kuakini Street

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	0	9

City Honolulu State HI Zip Code 96817-

Amount of Each Disbursement this Period

2100.00

Purpose of Disbursement
CHARITABLE DONATION

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

3600.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 20 / 22

<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input checked="" type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Abercrombie for Congress

A.

Full Name (Last, First, Middle Initial)
Rotary Club of Maui

Transaction ID: 90619.E5009
Date of Disbursement

Mailing Address c/o Harlan Hughes
406 Lower Kimo Drive

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	0	9

City Kula State HI Zip Code 96790-

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement
CHARITABLE DONATION

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

250.00

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

5455.23

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 21 / 22	
	FOR LINE NUMBER: (check only one)	<input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
 Abercrombie for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Abercrombie for Governor			Nature of Debt (Purpose): Note: Reimb. Shared Legal Fees
Mailing Address 1050 Ala Moana Blvd #D28			
City Honolulu	State HI	ZIP Code 96814-	

Outstanding Balance Beginning This Period		Transaction ID: LS90710.C23733	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
19141.70	0.00	19141.70	

1) SUBTOTALS This Period This Page (optional).....	19141.70
2) TOTALS This Period (last page this line number only).....	19141.70
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	19141.70

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 22 / 22	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Abercrombie for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Endo & Company, LLC	Nature of Debt (Purpose): Accounting Services
Mailing Address 1357 Kapiolani Blvd, #1005	
City Honolulu State HI ZIP Code 96814-	

Outstanding Balance Beginning This Period 0.00	Transaction ID: LS90707.E5023	
Amount Incurred This Period 2094.24	Payment This Period 0.00	Outstanding Balance at Close of This Period 2094.24

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Perkins Coie LLP	Nature of Debt (Purpose): Legal Services
Mailing Address 1201 Third Ave, 40th Floor	
City Seattle State WA ZIP Code 98101-	

Outstanding Balance Beginning This Period 0.00	Transaction ID: LS90708.E5025	
Amount Incurred This Period 7215.45	Payment This Period 0.00	Outstanding Balance at Close of This Period 7215.45

1) SUBTOTALS This Period This Page (optional).....	9309.69
2) TOTALS This Period (last page this line number only).....	9309.69
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	9309.69