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FEBAN026

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED

2011 JAN 24 PM 12: 12 FEC MAIL CENTER

Office Use Only

1. NAME OF COMMITTEE (in full)		OR PRINT ▼		nple: If typ the lines.	ing, type	12FE4M5	e eg
kona itea	Par	ty PAC	· - - -	<u> </u>		<u> </u>	
				<u>' </u>	<u> </u>	<u>l_iiil</u>	
ADDRESS (number and st	reet) Z	6-6372	fual	ani	Stae	<u> </u>	
Check if different than previously reported. (ACC)	il.	e//ue	hon.c.			HI 962	<u> 40</u> -
. FEC IDENTIFICATI	ON NUMBE	R ▼	CITY		s	TATE A	ZIP CODE A
C00485	136	:	B. IS THIS REPORT	:	NEW (N) OR	AMENDED (A)	
4. TYPE OF REPOR	RT (b)	Monthly Report Due On:	Feb 20 (M2)		May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Report	s:	e fi Ma	Mar 20 (M3)	97. T	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly R	enort (Q1)	*****	Apr 20 (M4)	<u>.</u> .	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)
July 15 Quarterly Re		(c) 12-Day PRE-Election		Primary (12	:P)		Runoff (12R)
October 15	-	Report for the	e:	Convention	(12C)	Special (12S)	
Quarterly Fl January 31 Year-End R		E	ection on	•	o de la composition della comp		in the State of
July 31 Mid Report (Nor Year Only)	r-election	(d) 30-Day POST-Electi		General (30)G)	Runoff (30R)	Special (30S)
Termination (TER)	Report	Report for the	lection on	7.7	02	2010	in the State of ##
i. Covering Period	a a /	14 30	O I O	through	71	22 20	10
certify that I have examing the control of Transfer of Transfer of Treasurer	ined this Rep	port and to the be	st of my knew	cer	<u>e</u>		nte.
Office Use	e, erroneous, c	or incomplete inform	nation may su	bject the pe	rson signing thi	FEC	ies of 2 U.S.C. §437g. FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS Page 2 FEC Form 3X (Rev. 02/2003) Write or Type Committee Name From: Report Covering the Period: **COLUMN A** COLUMN B Calendar Year-to-Date This Period (a) Cash on Hand January 1, (b) Cash on Hand at Beginning of Reporting Period..... (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) Total Disbursements (from Line 31)...... Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

Schedule C and/or Schedule D)

For further information contact:

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

Toll Free 809-424-9530 Local 202-694-1100

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DETAILED SUMMARY PAGE

of Receipts

Page 3

FEC Form 3X (Rev. 06/2004)

	ort Covering the Period: From:	0 14 2016	0 11 23 20 20
	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	The state of the s	116000
•	(i) Itemized (use Schedule A)	الأولونية الخالفي والأولونية الأولونية الأولونية الأولونية الأولونية الأولونية الأولونية الأولونية الأولونية ا المراجعة المعادل والأولونية الأولونية الإولونية الإولونية الإولونية الإولونية الأولونية الأولونية الأولونية ال	14002
	(ii) Unibersimad	_	10050
	(ii) Uniternized(iii) TOTAL (add	10.00	19850
	Lines 11(a)(i) and (ii)		1,598 5
		Security of an experience of the security of t	
(b) Political Party Committees	in the second of	1 un e e e e
(c) Other Political Committees	The second secon	
	(such as PACs)	The state of the s	· · · · · · · · · · · · · · · · · · ·
(d) Total Contributions (add Lines		
	11(a)(iii), (b), and (c)) (Carry	1000	15985
40 7	Totals to Line 33, page 5)	10.00	1578
	ransfers From Affiliated/Other Party Committees	the state of the s	1814 - 8 AL 18
,	ary Communes	and the state of t	7. F
13. /	All Loans Received		,
		and the second of the second o	and the second s
14. l	oan Repayments Received		, -
	Offsets To Operating Expenditures	The state of the South Comment of the South	Entropy of the state of the sta
(Refunds, Rebates, etc.)	and the control of th	الدارية المراكب المراكب المراكبة واستبعون
(Carry Totals to Line 37, page 5)		ing the state of t
16. F	Refunds of Contributions Made		and the state of t
	o Federal Candidates and Other	the second service of the second services of	Control of the second of the s
	Political Committees	and the state of t	artist and the state of the state of the state of
	Other Federal Receipts	AND THE STATE OF T	and the second of the second of the second of
	Dividends, Interest, etc.)	* * * *	· · · · · · · · · · · · · · · · · · ·
	a) Non-Federal Account	and the second of the second o	grand and the second of the sequence of the second of the
,	(from Schedule H3)		•
	(الأرساني في المحالية الهارينية العالمية المحالية المحالية المحالية المحالية المحالية المحالية المحالية المحالي المحالية المحالية ال	A Silver
,	b) Levin Funds (from Schedule H5)	•	
v	ar maint i direct from Seriodelle (10) milin	The second secon	er e
(c) Total Transfers (add 18(a) and 18(b))		The state of the s

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12, 13, 14, 15, 16, 17, and 18(c)).......

(subtract Line 18(c) from Line 19)

20. Total Federal Receipts

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Petiod	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal	togal files concerns the speciment of the state of the state of	
	Activity (from Schedule H4)	the grant of the same of the segment of the second of the	The second of th
	(i) Federal Share	and seem of the second second	in the second of
	(ii) Non-Federal Share(b) Other Federal Operating		The second secon
	Expenditures	ing the second s	$\frac{3}{2} \left(\frac{1}{2} \right) \right) \right) \right)}{1} \right) \right) \right)}{1} \right) $
	(c) Total Operating Experiditures (add 21(a)(i), (a)(ii), and (b))		and the second s
22.	Transfers to Affiliated/Other Party	The second secon	
23.	CommitteesContributions to Federal Candidates/Committees	2.80.00	14400
24.	and Other Political Committees Independent Expenditures	A CONTRACT OF THE CONTRACT OF	140000
25.	(use Schedule E)	The product of the control of the co	$\left\{ \begin{array}{ll} \frac{1}{2} \left(\frac{1}{2} \right) \right) \right) \right) \right)}{1} \right) \right) \right)} \right) \right) \right)} \right) \right) \right\}} \right) \right\}} \right] $
	(use Schedule F)	The state of the s	Transfer Tra
	Loan Repayments Made	····································	And the second of the second o
	Loans Made	(a) The second of the secon	The second section of the second section of the second section of the second section of the second section sec
	. That I only commedition		And the second section of the second section of the second section of the second section secti
	(c) Other Political Committees	and the state of	4. 25
	(such as PACs)	Participation & Commence of Commence	State of the state
	(d) Total Contribution Refunds	reaction of the control of the contr	a company of the second
	(add Lines 28(a), (b), and (c))▶	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	1 49 Jan 2015 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
29.	Other Disbursements	The second of the second second second	123.75
	Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity		
	(from Schedule H6) (i) Federal Share	Control of the property of the control of the contr	The state of the s
	(ii) "Levin" Share	A constraint of the second of	- Product Buy 数型 - 一、大阪 product Community (- Transfer of Market Community
	(b) Federal Election Activity Paid Entirely With Federal Funds	•	The transfer of the transfer o
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	The state of the s	
		A The Company of Design of Same Company of the	and the first of the state of the state of the state of
31.	Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	2000	120075
		200,00	1.523 75
32.	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)	TREAT OF THE CONTRACT OF THE C	Annual of American materials of the Salah
	from Line 31)	the second of th	the second of th

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures		Total This Doub of	
	Total Contributions (other than loans) (from Line 11(d), page 3) Total Contribution Refunds		, 1,598.52
	(from Line 28(d))	10.00	1,59850
	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	*	
,	Offsets to Operating Expenditures (from Line 15, page 3)	- Appelle Andrew Andr	The second secon
	Net Operating Expenditures (subtract Line 37 from Line 36)		and the second of the second o

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE / OF /		
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17		
Any information copied from such Reports a	and Statements many the name and a	ay not be sold or used by any peaddress of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.		
Pana lea	fax	ty PAC	•		
Full Name (Last, First, Middle Initial) A.			Date of Receipt		
Mailing Andreas			H 4		
City	State	Zip Code	Amount of Each Receipt this Period		
€C ID number of contributing lederal political committee.	С				
Name of Employer	Occupation		1		
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼			
Full Name (Last, First, Middle Initial)		· · · · · · · · · · · · · · · · · · ·	Date of Receipt		
Mailing Address					
City	State	Zip Code	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		,		
Name of Employer	Occupation	**************************************			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼			
Full Name (Last. First, Middle Initial) C.			Date of Receipt		
Mailing Address					
City	State	Zip Code	America de la companya del companya della companya		
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period		
Name of Employer	Occupation		-		
Receipt For: Primary General Other (specify)	Aggregate `	Year-to-Date ▼			
SUBTOTAL of Receipts This Page (optional)		, -, 0		
TOTAL This Period (last page this line num	ber only)	•			

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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE OF
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only	one) 22 23 24 25 26 28a 28b 28c 29 30b
Any information copied from such Reports and Stater or for commercial purposes, other than using the name	nents may not be sold or use ne and address of any politica	ed by any pers al committee to	on for the purpose of soliciting contributions solicit, contributions from such committee
NAME OF COMMITTEE (In Full).	Papty	PAC	1
Full Name (Last, First, Middle Initial) A. Least Becky Mailing Address D 2007			Date of Disbursement
VO. 3750	State Zip Code 73	9	
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
I I	nent For: Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial) B.			Date of Disbursement
Mailing Address			
City	State Zip Code		
Purpose of Disbursement Candidate Name		Category/ Type	Amount of Each Disbursement this Period .
:	nent For: Primary General Other (specify) ▼		
Full Name (Last. First, Middle Initial) C.			Date of Disbursement
Mailing Address			
City S Purpose of Disbursement	tate Zip Code		
Candidate Name		Category/ Type	Amount of Each Disbursement this Penou
	ent For: Primary General Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)	······································		

SCHEDULE G (FEC Form 3X)					
LOANS	Use separate schedule(s)	PAGE OF			
	for each category of the Detailed Summary Page	FOR LINE 13 OF FORM 3X			
NAME OF COMMITTEE (In Full) Kona Tea Party PA	<i>*</i>				
LOAN SOURCE Full Name (Last, First, Middle Initial)	E	lection:			
4.0 /4	·	Primary			
		General			
Mailing Address		Other (specify) ▼			
City State ZIP Co					
Original Amount of Loan Cumulative Payment To	Date Balance	Outstanding at Close of This Period			
The stage of the s	.	read to the state of the state			
TERMS Date Incurred Date Due		Secured:			
A W C C C C C C C C C C C C C C C C C C	y	% (apr) Yes No			
and the second s	·	- /e (apr) 100			
List All Endorsers or Guarantors (if any) to Loan Source					
1. Full Name (Last, First, Middle Initial)	Name of Employer				
Mailing Address	Occupation				
	Amount				
City State ZIP Code	Guaranteed Outstanding:	,			
2. Full Name (Last, First, Middle Initial)	Name of Employer				
Malling Address	Occupation				
	Amount				
. City State ZIP Code	Guaranteed				
, a	Outstanding:	• •			
3. Full Name (Last, First, Middle Initial)	Name of Employer				
Mailing Address	Occupation				
	Amount				
City State ZIP Code	Guaranteed Outstanding:	on the officer with the			
4. Full Name (Last, First, Middle Initial)	Name of Employer				
Mailing Address	Occupation				
	A				
City State ZIP Code	Amount Guaranteed	·			
	Outstanding:	· y , ,			
	•				
SUBTOTALS This Period This Page (optional)	.	5 . 5			
TOTALS This Period (last page in this line only)) , , ,			
Carry outstanding balance only to LINE 3, Schedule D, for this line. If	no Schedule D, carry forward	to appropriate line of Summary.			

SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for information found on Page ____ of Schedule C

Federal Election Commission, Washington, D.C. 20463			
NAME OF COMMITTEE (In Full)	O1 A	FEC	DENTIFICATION NUMBER
Kong Tea facty	1 FAC.	C	00485136
LENDING INSTITUTION (LENDER)	Amount of Loan	,	Interest Rate (APR)
Full Name	5 - 1 - c - ·		
Mailing Address	Date Incurred or Established	bij +n	B n (v v
City State Zip Code	Date Due	M V	and the second s
A. Has loan been restructured? No Yes	It yes, date originally incurre		ή" σ · Υ
B. If line of credit,	Total Outstanding		
Amount of this Draw:	Balance:	. •	. ,
C. Are other parties secondarily liable for the debt incurr No Yes (Endorsers and guarantors me	ed? ust be reported on Schedule C.)		
D. Are any of the following pledged as collateral for the property, goods, negotiable instruments, certificates of stocks, accounts receivable, cash on deposit, or other	deposit, chattel papers,	What is the	value of this collateral?
No Yes If yes, specify:			•
		Does the le	nder have a perfected security
E. Are any future contributions or future receipts of interest collateral for the loan? No Yes If yes, s	· ·		estimated value?
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Location of account:		
Date account established:	Address:		
Man Man St. 15 A. A. A. M. A. A.	City, State, Zip:		
F. If neither of the types of collateral described above wa		amount plede	ged does not equal or exceed
the loan amount, state the basis upon which this loan			
G. COMMITTEE TREASURER		DATE	
Typed Name Signature		, , ,	/ n n . v · ·
H. Attach a signed copy of the loan agreement.			
TO BE SIGNED BY THE LENDING INSTITUTION: To the best of this institution's knowledge, the tell are accurate as stated above.	rms of the loan and other inform	nation regardi	ng the extension of the loan
The loan was made on terms and conditions (inc similar extensions of credit to other borrowers of	comparable credit worthiness.		,
III. This institution is aware of the requirement that a complied with the requirements set forth at 11 C	a loan must be made on a basis FR 100.82 and 100.142 in maki	s which assuring this loan.	es repayment, and has
AUTHORIZED REPRESENTATIVE		DATE	
Typed Name Signature Titl	e	- ¥ 1:	e esta de la companya
		1	1

SCHEDULE D (FEC Form 3X)	(Use separate	PAGE	OF
DEBTS AND OBLIGATIONS s		FOR LINE NUMBE	1
Excluding Loans	for each numbered line)	(check only one)	9
HOWA Tea Pasty PAL			
A. Full Name (Last, First, Middle Initial) of Debtor of Creditor	Nature of D	ebt (Purpose):	
Mailing Address City State Zip Code			
City State Zip Code			
Outstanding Balance Beginning This Period			
Amount Incurred This Period Payment This Period	Outstandin	g Balance at Close o	of This Period
		Tomas - Type	•
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of De	ebt (Purpose):	
Mailing Address			
City State Zip Code			
Outstanding Balance Beginning This Period			
Amount Incurred This Period Payment This Period	Outstanding	g Balance at Close o	f This Period
	· . · -	The sources of the design of	" .
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of De	bt (Purpose):	
Mailing Address			
City State Zip Code			
Outstanding Balance Beginning This Period			
Amount Incurred This Period Payment This Period	Outstanding :	g Balance at Close o	f This Period
grows grown and a superior of the superior		5 (4.12)	
1) SUBTOTALS This Period This Page (optional)		Burgar Same M	
This Borled (lest page this line number only)		*	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)		, ,	,
3) TOTAL OUTSTANDING LOANS from 1997 and 3) and carry forward to appropriate line of Summary Page (last page only	y) ▶	1 3	
and and carry forward to appropriate and of carry forward to appropriate			

 $\circ\circ$

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES	PAGE 7 OF FOR LINE 24 OF FORM 3X
Lona Tea Party PAC	FEC IDENTIFICATION NUMBER V
Check if 24-hour notice 48-hour notice	,
Full Name (Last, First, Middle Initial) of Payee Mailing Address City State Zip Code	Amount
Purpose of Expenditure Category/ Type	Office Sought: House State: Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Mailing Address	Amount
City State Zip Code	F 1
Purpose of Expenditure Category/ Type	Office Sought: House State Senate District: President
Name of Federal Candidate Supported or Opposed by Expenditure:	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	····· •
(b) SUBTOTAL of Unitemized Independent Expenditures	····· ► × · · · · · · · · · · · · · · ·
(c) TOTAL Independent Expenditures	······································
Under penalty of perjury I certify that the independent expenditures reported herein wer with, or at the request or suggestion of, any candidate or authorized committee or agent party committee) any political party committee or its agent.	re not made in cooperation, consultation, or concert tof either, or (if the reporting entity is not a political .
Da	ti jou no no , or

SCHEDULE F (FEC Form 3X) ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S) ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE

ON BEHALF OF CANDIDATES	FOR FEDE	RAL OFFIC	E		PAGE	OF /
			mittees in the Ger	eral Election)	FOR LINE 2	5 OF FORM 3X
NAME OF COMMITTEE (In Full)	Pa	e, ty	PAC	/ •		
tas your committee been designated to moordinated expenditures by a political part YES NO YES, name the pesignating committee:	y committee?	uli Name of Sub	ordinate Committee			
·	7	City	//*	Sı	ate ZIP	Code
Full Name (Last, First, Middle Initial) of	Each Payee			Purpose of Exp	enditure	
Mailing Address	en gant semengan samu dan semplet di basses s ^{am} es d		annotation to the first one of a control against the	Date		Category/ Type
City	State	Zip Code		,, ,,	: 11 ·	
Name of Federal Candidate Supported	Office Sought:	House Senate Presidential	State: District:	Amount		
Aggregate General Election Expenditure for this Candidate ▶	.5	·				
Full Name (Last, First, Middle Initial) of	Each Payee			Purpose of Exp	enditure	Category/
Mailing Address				Date	for a companies of an additional and a	Туре
City	State	Zip Code	Transmission (111) age ag	,	n e	•
Name of Federal Candidate Supported	Office Sought:	House Senate Presidential	State: District:	Amount		
Aggregate General Election Expenditure for this Candidate ▶	•					·
Full Name (Last, First, Middle Initial) of	Each Payer			Purpose of Exp	enditure	
Mailing Address				Data	··· · · · · · · · · · · · · · · · ·	Category/ Type
City	State	Zip Code		Date		
Name of Federal Candidate Supported	Office Sought:	House Senate Presidential	State: District:	Amount		
Aggregate General Election Expenditure for this Candidate ▶	;				-	
UBTOTAL of Expenditures This Page (op	tional)				*	
OTAL This Period (last page this line num	iber only)					

SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)

NAME	of committee (In Full) Ona Per Per PAC USE ONLY ONE SECTION, A or B
.1 .	OSE ONE! ONE SECTION, A UI B
Α.	State and Local Party Committees Fixed Percentage (select one)
į	Presidential-Only Election Year (28% Federal)
1	Presidential and Senate Election Year (36% Federal)
,	Senate-Only Election Year (21% Federal)
	Non-Presidential and Non-Senate Election Year (15% Federal)
:	
В.	Separate Segregated Funds and Nonconnected Committees Flat Minimum Federal Percentage
į	If the committee will allocate using the flat minimum percentage of 50% federal funds, check
:	or If the committee is spending more than 50% federal tunds, indicate ratio below
	Nonfederal
	This ratio applies to (check all that apply): Public Communications Referencing Party Only
	Administrative Generic Voter Drive Public Communications (1997)

SCHEDULE H2 (FEC Form 3X)		[
ALLOCATION RATIOS	PAGE / OF /	
NAME OF COMMITTEE (In Full) Your Tea Fast Rec	•	
NATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDA	ATE SUPPORT	
enthods of allecation:		
 FUNDRAISING activities are allocated using the "funds received met expenses must equal the federal proportion of monies raised. 	thod" where the federal p	roportion of
II. Shared DIRECT CANDIDATE SUPPORT activities are allocated accommendate the federal proportion of disbursements is based on the bene tivity. Fer PACs Only: Direct dandldate support includes public commendate and nonfederal candidates, regardless of whether there is a are allocated using a time/space method.	fit derived by federal cand nunications or voter drive	didates from the ac-
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS: New Revised Same as Previously Reported	-0 %	0
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS:	. %	. %
New Revised Same as Previously Reported		
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS:	. %	•/0
New Revised Same as Previously Reported		
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS: Fundraising Direct Candidate Support	· %	70
CHECK IF THE RATIO IS: New		
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS:	TEOLITIC 76	NONFEDERAL %
Fundraising Direct Candidate Support CHECK IF THE RATIO IS:	0,0	<u></u> ,
New Revised Same as Previously Reported		
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS:	%	0. 20
New Revised Same as Previously Reported		

SCHEDULE H3 (FEC Form 3X) TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE	OF	1	
EUD LINE	180 OF	FORM	37

NAME OF COMMITTEE (In Full) Party PAC	
NAME OF ACCOUNT KO Water Party PAC DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
BREAKDOWN OF TRANSFER RECEIVED	6 6
i) Total Administrative	
ii) Generic Voter Drive	-0.5
iii) Exempt Activities	-0-
iv) Direct Fundralsing (List Activity or Event Identifier)	
a)	·
b)	
c) Total Amount Transferred For Direct Fundraising	10 -
v) Direct Candidate Support (List Activity or Event Identifier)	
a)	
b)	
c) Total Amount Transferred For Direct Candidate Support	_ 0 /
vi) Public Communications Referring Ority to Party (Made by PAC)	01
TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED	
TOTAL This Period (Administrative)	e*-
FOTAL This Period (Generic Voter Drive)) ·
TOTAL This Period (Exempt Activities)	_0/
TOTAL This Period (Direct Fundraising),	-10-
OTAL This Period (Direct Candidate Support)	-0-
OTAL This Period (Public Communications Referring Only to Party)	-02
OTAL This Period (Total Amount Transferred)	-0-

FEBANO28

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED

_	SBURSEMENTS FOR ALLOCATED DERAL/NONFEDERAL ACTIVITY		FOR LINE 21a OF FORM 3
ΑĪ	ME OF COMMITTEE (In Full)	01	
	france Jece Farty		1 C
	Full Name (Last, First, Middle Initial)		Allocated Activity or Event:
-	Na-III Andress	-	Administrative Fundraising Exempt
	Mailing Address		Voter Drive Direct Candidate Support
-	City State Zip Code		Public Comm (ref to party only) by PAC
-	Purpose of Wisburgement:		- Allocated Activity or Event Year-To-Date
-	Activity or Event Identifier:]	y
,		Category/ Type	Date
-	FEDERAL SHARE + NONFEDERAL	SHARE	= TOTAL AMOUNT
	The way to the first the second of the secon	r	The second of th
1	Full Name (Last, First, Middle Initial)		Allocated Activity or Event:
			Administrative Fundraising Exempt
Ī	Malling Address		Voter Drive : Direct Candidate Support
7	City State Zip Code		Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date
7	Purpose of Disbursement:		Auditable Activity of Event Teel To Table
-	Activity or Event Identifier:	Category/	2' 6' · n '9" · · · · · ·
		Туре	Date
_	FEDERAL SHARE + NONFEDERAL		= TOTAL AMOUNT
_	FEDERAL SHARE		= TOTAL AMOUNT
	FEDERAL STIANS		= TOTAL AMOUNT
	FEDERAL SHARE		= TOTAL AMOUNT Allocated Activity or Event: Administrative Fundraising Exempt
	Full Name (Last, First, Middle Initial)		Allocated Activity or Event: Administrative Fundraising Exemp
	Full Name (Last, First, Middle Initial) Mailing Address		TOTAL AMOUNT Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC
-	Full Name (Last, First, Middle Initial) Mailing Address State Zip Code		Allocated Activity or Event: Administrative Fundraising Exemp
-	Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code		Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date
-	Full Name (Last, First, Middle Initial) Mailing Address State Zip Code		Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date
-	Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement:	SHARE Category/	Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date
-	Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement: Activity or Event Identifier:	Category/ Type	Allocated Activity or Event: Administrative Fundraising Exemp Voter Drive Direct Candidate Suppor Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date
-	Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement: Activity or Event Identifier:	Category/ Type	Allocated Activity or Event: Administrative Fundraising Exemply Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date
-	Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement: Activity or Event Identifier:	Category/ Type	Allocated Activity or Event: Administrative Fundraising Exemp Voter Drive Direct Candidate Suppor Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date
-	Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement: Activity or Event Identifier: FEDERAL SHARE + NONFEDER	Category/ Type	Allocated Activity or Event: Administrative Fundraising Exemp Voter Drive Direct Candidate Suppor Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date
	Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement: Activity or Event Identifier: FEDERAL SHARE + NONFEDER	Category/ Type	Allocated Activity or Event: Administrative Fundraising Exemply Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 7 Date TOTAL AMOUNT
-	Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement: Activity or Event Identifier: FEDERAL SHARE + NONFEDER	Category/ Type	Allocated Activity or Event: Administrative Fundraising Exemply Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date
	Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement: Activity or Event Identifier: FEDERAL SHARE + NONFEDER , NONFEDER NONFEDER	Category/ Type	Allocated Activity or Event: Administrative Fundraising Exemply Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date TOTAL AMOUNT TOTAL AMOUNT
- S	Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement: Activity or Event Identifier: FEDERAL SHARE + NONFEDER SUBTOTAL of Allocated Federal and NonFederal Activity This Page NONFEDER	Category/ Type AL SHARE	Allocated Activity or Event: Administrative Fundraising Exemply Voter Drive Direct Candidate Suppor Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date TOTAL AMOUNT TOTAL AMOUNT
- S	Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement: Activity or Event Identifier: FEDERAL SHARE + NONFEDER SUBTOTAL of Allocated Federal and NonFederal Activity This Page NONFEDER	Category/ Type AL SHARE	Allocated Activity or Event: Administrative Fundraising Exemply Voter Drive Direct Candidate Suppor Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date TOTAL AMOUNT TOTAL AMOUNT
· · · · · · · · · · · · · · · · · ·	Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement: Activity or Event Identifier: FEDERAL SHARE + NONFEDER FEDERAL SHARE + NONFEDER FEDERAL SHARE + NONFEDER FEDERAL SHARE + NONFEDER NONFEDER	Category/ Type AL SHARE	Allocated Activity or Event: Administrative Fundraising Exemp Voter Drive Direct Candidate Suppor Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date TOTAL AMOUNT TOTAL AMOUNT
· · · · · · · · · · · · · · · · · ·	Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement: Activity or Event Identifier: FEDERAL SHARE + NONFEDER , NONFEDER NONFEDER	Category/ Type AL SHARE and NonFederal RAL SHARE	Allocated Activity or Event: Administrative Fundraising Exemp Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date TOTAL AMOUNT TOTAL AMOUNT

SCHEDULE H5 (FEC Form 3X)

TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

	PAGE	OF	7		
ı	FOR LINE	18b OF	FOR	M	3)

NAME OF COMMITTEE (In Full)	Party PA	· C			
NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED			
X/1					
BREAKDOWN OF THIS TRANSFER	VOTER REGISTR	NATION			
Total Amount Transferred for Vo	ter Registration				
		OTER ID			
ii) Voter ID	•				
Total Amount Transferred for Vo	iter ID	•			
ili) GOTV		(3C)T V			
	OTV				
		; GENERIC CAMPAIGN ACTIVITY			
iv) Generic Campaign Activity					
Total Amount Transferred for Ge	eneric Campaign Activity	3 1			
NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED			
4	, in gr				
		, , , , , , , , , , , , , , , , , , , ,			
BREAKDOWN OF THIS TRANSFER					
	VOTER REGISTA	NOTATION			
i) Voter Registration Total Amount Transferred for Voter Registration					
iotal Amount transieried for Vo	•	CITED ID			
ii) Voter ID	. •	OTER ID			
Total Amount Transferred for Vo	ter ID				
III com		GOTV			
iii) GOTV	DTV				
Total Amount Transferred for GC	/I V				
iv) Generic Campaign Activity		GENERIC CAMPAIGN ACTIVITY			
	neric Campaign Activity	• •			
TOTALS FOR E	BREAKDOWN OF TRANSFER RECEIVED (Le	ast Page Only)			
TOTAL This Period (Voter Ringistration)					
· · · · · · · · · · · · · · · · · · ·	- ş	•			
TOTAL This Period (Voter ID)					
TOTAL This Period (GOTV)		3			
TOTAL This Period (Generic Campaign	Activity)	,			
TOTAL This Period (Total Amount of Tra	ansfers Received)	·····			

SCHEDULE H6 (FEC Form 3X) DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

PAGE	P	OF	1	
FOR LINE	30a	Öľ	FORM	äx

Kong, Tea Party	PAC	, シ
		Type of Allocated Activity or Event:
A. Full Name (Last, First, Middle Initial) / Full Organization Name		Voter Registration (30)TV
		Voter ID Generic Campaig
<i>l </i>		
Mailing Address		- Allocated Activity or Event Year-To-Date
Mailing Address		
City State Zip Code		-, ,
City / State Zip Cone		
Purpose of Disbursement		5ú ki
Pulpose of Dispulsonicin	Category/ Type	Date
The state of the s		
FEDERAL SHARE + LEVIN S	SHARE	= TOTAL AMOUNT
5	·	<u> </u>
B. Full Name (Last, First, Middle Initial) / Full Organization Name		Type of Allocated Activity or Event:
		Voter Registration GOTV
		Voter ID Generic Campaig
		· ·
Mailing Address		Allocated Activity or Event Year 10-1)ate
City State Zip Code		, .
		A STATE OF THE PARTY OF THE PAR
Purpose of Disbursement	Category/	N 20 10 10 10 10 10 10 10 10 10 10 10 10 10
	Type	Date
FEDERAL SHARE + LEVIN S		= TOTAL AMOUNT
4	•	,
C. Full Name (Last, First, Middle Initial) / Full Organization Name		Type of Allocated Activity or Event:
		Voter Registration GOTV Voter ID Generic Campaign
•		Generic Campaig
		Allocated Activity or Event Year-To-Date
Aailing Address		Anocated Activity of Event 1981-10-17816
Offy State Zip Code		1
City State Zip Code		.2
Purpose of Disbursement	- 4	For the second of
urpage of Disputational	Category/	Date
	Type	J
FEDERAL SHARE + LEVIN SI	HARE	= TOTAL AMOUNT
·		
***	:	1 -
TOTAL of Shared Federal and Levin Activity This Page		
FEDERAL SHARE + LEVIN SH	HARE	TOTAL AMOUNT
		*
AL This Period (last page for each line only)(Federal share to 30(a)(i) at	nd Levin share to	30(a)(ii))
FEDERAL SHARE		TOTAL AMOUNT
,	4.4.15.10	
, LEVIN SH	MARE	• :
AL This Period for the Levin Share		
<u> </u>		

SCHEDULE L (FEC Form 3X) AGGREGATION PAGE: LEVIN FUNDS

NAM	E OF COMMITTEE (In Full)	I	2,	12	V4	-/.		
	Kona, Jea	10	2+	ZX XI	1/1			v- v
NAM	E OF ACCOUNT			1	•			
			TOT	COLUMN A	ΩD		.UMN B -TO-DATE	
1.	HECEIP 12 FROM PERSONS							** *** ;* */ *** *
	(a) Itemized(Use Schedule L-A)		4	2		•	•	
•	(b) Uniternized	:	1	:	•	1	y	
	(c) Total		*			•	1	
2.	OTHER RECEIPTS	q ^a .	4			1	•	
3.	TOTAL RECEIPTS(Add Unes 1c and 2)	. '	3	3		· •	,	
4.	TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)							an ti day ang min anagan
	(a) Voter Registration		. >	>		· • • • • • • • • • • • • • • • • • • •	. y.	
	(b) Voter ID		, .	;	• .	. 1	,	
	(c) GOTV		•	1	•	, , , , , , , , , , , , , , , , , , ,	" ,	
	(d) Generic Campaign		. 1	-):	1	
	(e) Total		y	, H		1	1	. ,
5.	OTHER DISBURSEMENTS		;	Ť			1	
6.	TOTAL DISBURSEMENTS		· Iı	1		3	,	
7.	BEGINNING CASH ON HAND(for Column B, use cash as of January 1st)	••	1	1	• .	. }	4.	
8.	RECEIPTS		. •	ų.		. 5	1	
9.	SUBTOTAL		*	*	• .	. 1	·	
10.	DISBURSEMENTS(From Line 8)						;	
1.	ENDING CASH ON HAND(Subtract Line 10 From Line 9)					· • • • • • • • • • • • • • • • • • • •		j

SCHEDULE L-A (FEC Form 3X)

Use separate schedule(s)

	•		
7	8		1:

PAGE [OF

	EMIZED RECEIPTS OF LEVIN FUNDS	for each category of the Aggregation Page	FOR LINE NUMBER: (check only one)
A	ny information copied from such Reports and Statements may not in for commercial purposes, other than using the name and address	be sold or usea by any perso of any political committee to	n for the purpose of soliciting contributions salicit contributions from such committee.
	NAME GECOMMITTEE (In Full) Sona Tea Party	PAC	
	Full Name (Last, First, Middle Initial) / Full Organization Name	1	Date of Receipt
A.	100		War to the same
	Mailing Address		
			Amount of Each Receipt this Period
	City	Zip Code	
	Name of Employer or Principal Place of Business		4 i \$
		, up. appro - sk and district to the September again a nament dispuyant gay aphrical diagrams of standards.	Aggregate Year-to-Date
	Occupation		T 40 3
_	Full Name (Last, First, Middle Initial) / Full Organization Name		Date of Receipt
B.			as as y of a v
	Mailing Address		
	Maiming Address	F	
	City State	Zip Code	Amount of Each Receipt this Period
	Name of Employer or Principal Place of Business		*
	reams of Employer of Findipal Factor of Submission		Aggregate Year-to-Date
	Occupation		to Date
			2
	Full Name (Last, First, Middle Initial) / Full Organization Name		Date of Receipt
C.			Property of the property of
	Mailing Address		
		-	Amount of Each Receipt this Period
	City State	Zip Code	Amount of Each Receipt this Period .
	Name of Employer or Principal Place of Business		3
	realing of Employer of Filliopal Flage of Easings		
	Occupation		Aggregate Year-to-Date
			, ,
_	Full Name (Last, First, Middle Initial) / Full Organization Name		Date of Receipt
D.			a a par
	A. III. A. A. A. A.		
	Mailing Address	 	
	City State	Zip Code	Amount of Each Receipt this Period
	Name of Employer or Hringing Disease Contract		
	Name of Employer or Principal Place of Business		1
	Occupation		Aggregate Year-to-Date
_			9 5
S	UBTOTAL of Receipts This Page (optional)		
_			ade is, g
10	OTAL This Period (last page this line number only)		:

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: PAGE OF 1 (check only one) 4a 4c 5

OF LEVIN FUNDS	Aggregation Page	4b 4d
Any information copied from such Reports and Statement or for commercial numbers, other than using the name at	s may not be sold or used by any pand address of any political committee	person for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Kona Tea Far	to PAC	·
Full Name (Last, First, Middle Initial) / Full Organization	n Name	Date of Disbursement
$\sim 1 / 1$		This is a profession of the state of
Mailing Address		e e d'anne
City	e Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		o P opulario (No.
Full Name (Last, First, Middle Initial) / Full Organization	n Name	
3.		Date of Disbursement
Malling Address		Market of the state of the stat
City State	e Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		5438 9
Full Name (Last, First, Middle Initial) / Full Organization	n Name	Date of Disbursement
,		W V C D Y Y Y
Mailing Address		
City State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement	,	Francisco - Barrello - Company
Full Name (Last, First, Middle Initial) / Full Organization	Name	
). •	•	Date of Disbursement
Mailing Address		"N" "
City State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		
Full Name (Last, First, Middle Initial) / Full Organization	Name	
		Date of Disbursement
Nation Address		and an angle of the second of
Malling Address		A Company of the Comp
City State	Zip Code .	Amount of Each Disbursement this Period
Purpose of Disbursement		Betang of access to 30
SUBTOTAL of Disbursements This Page (optional)		
FOTAL This Period (last page this line number only)		And the second of the second o
To the follow (less page this line fluither Offly)	• • • • • • • • • • • • • • • • • • •	and the second second second of the second second of the

Federal Election Com ENVELOPE REPLACEMENT PAGE FOF The FEC added this page to the end of this filing	R INCOMING DOCUMENTS
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked // (1)
Delivery Confirmation™ or Sigr	nature Confirmation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
ı	Next Business Day Delivery
Received from House Records & Registration	Date of Receipt of Office
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
er	1/24/11
PREPARER	DATE PREPARED

(3/2005)