

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Pacific Century Financial Corp. Special Political Education Committee

ADDRESS (number and street) 130 Merchant Street, Ste. 1180
 Check if different than previously reported. (ACC)
Honolulu HI 96813

2. **FEC IDENTIFICATION NUMBER** C00025668
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the: Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on 09 23 2006 in the State of HI
(d) 30-Day **Post -Election** Report for the: General (30G) Runoff (30R) Special (30S)
Election on in the State of

5. Covering Period 07 01 2006 through 09 03 2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Mr. Robert Crowell
Signature of Treasurer Electronically Filed by Mr. Robert Crowell Date 09 11 2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Pacific Century Financial Corp. Special Political Education Committee

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

D	D
0	3

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date										
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%;"><tr><td align="right">42708.80</td></tr></table>	42708.80
Y	Y	Y	Y									
2	0	0	6									
42708.80												
(b) Cash on Hand at Beginning of Reporting Period	<table border="1" style="width: 100%;"><tr><td align="right">25573.80</td></tr></table>	25573.80										
25573.80												
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%;"><tr><td align="right">4667.50</td></tr></table>	4667.50	<table border="1" style="width: 100%;"><tr><td align="right">18942.50</td></tr></table>	18942.50								
4667.50												
18942.50												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1" style="width: 100%;"><tr><td align="right">30241.30</td></tr></table>	30241.30	<table border="1" style="width: 100%;"><tr><td align="right">61651.30</td></tr></table>	61651.30								
30241.30												
61651.30												
7. Total Disbursements (from Line 31)	<table border="1" style="width: 100%;"><tr><td align="right">11000.00</td></tr></table>	11000.00	<table border="1" style="width: 100%;"><tr><td align="right">42410.00</td></tr></table>	42410.00								
11000.00												
42410.00												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1" style="width: 100%;"><tr><td align="right">19241.30</td></tr></table>	19241.30	<table border="1" style="width: 100%;"><tr><td align="right">19241.30</td></tr></table>	19241.30								
19241.30												
19241.30												
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
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
Pacific Century Financial Corp. Special Political Education Committee

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

D	D
0	3

Y	Y	Y	Y
2	0	0	6

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)	3170.00	9845.00
(ii) Unitemized	1497.50	8897.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)	4667.50	18742.50
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	4667.50	18742.50
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	200.00
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 Transfer (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))	4667.50	18942.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	4667.50	18942.50

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2800.00	14810.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(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.....	8200.00	27600.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	11000.00	42410.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	11000.00	42410.00

DETAILED SUMMARY PAGE
of Disbursements

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)	4667.50	18742.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4667.50	18742.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 15
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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)
Pacific Century Financial Corp. Special Political Education Committee

Full Name (Last, First, Middle Initial) A. Mr. William Barton		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2006	
Mailing Address PO Box 2900		Transaction ID: SA11A1.9686	
City Honolulu	State HI	Amount of Each Receipt this Period 100.00	
Zip Code 96846-6000			
FEC ID number of contributing federal political committee. C			
Name of Employer Pacific Century Trust	Occupation Senior Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) B. Mr. Peter Biggs		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2006	
Mailing Address P.O. Box 2900		Transaction ID: SA11A1.9688	
City Honolulu	State HI	Amount of Each Receipt this Period 100.00	
Zip Code 96846			
FEC ID number of contributing federal political committee. C			
Name of Employer Bank of Hawaii	Occupation Executive Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) C. Ms Teresa Cronkhitte		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2006	
Mailing Address 949 Kamokila Blvd.		Transaction ID: SA11A1.9692	
City Kapolei	State HI	Amount of Each Receipt this Period 100.00	
Zip Code 96707			
FEC ID number of contributing federal political committee. C			
Name of Employer Bank of Hawaii	Occupation Senior Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

SUBTOTAL of Receipts This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 15
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Pacific Century Financial Corp. Special Political Education Committee

A. Full Name (Last, First, Middle Initial)
Ms. Bonnie Fong

Mailing Address PO Box 2900

City Honolulu State HI Zip Code 96846-6000

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

Name of Employer Pacific Century Trust Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2006

Transaction ID: SA11A1.9693

Amount of Each Receipt this Period
60.00

B. Full Name (Last, First, Middle Initial)
Ms. Kathleen Fujihara-Chong

Mailing Address PO Box 2900

City Honolulu State HI Zip Code 96846-6000

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

Name of Employer Bank of Hawaii Occupation Executive Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2006

Transaction ID: SA11A1.9694

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. Wayne Hamano

Mailing Address PO Box 2900

City Honolulu State HI Zip Code 96846-6000

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

Name of Employer Bank of Hawaii Occupation Executive Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2006

Transaction ID: SA11A1.9696

Amount of Each Receipt this Period
70.00

SUBTOTAL of Receipts This Page (optional)	▶	230.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 15
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Century Financial Corp. Special Political Education Committee

Full Name (Last, First, Middle Initial) A. Ms. Janet Katakura		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2006	
Mailing Address PO Box 2900		Transaction ID: SA11A1.9699	
City Honolulu	State HI	Amount of Each Receipt this Period 100.00	
Zip Code 96846-6000		FEC ID number of contributing federal political committee. C	
Name of Employer Pacific Century Trust	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) B. Mr. Richard Keene		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2006	
Mailing Address P.O. Box 2900		Transaction ID: SA11A1.9700	
City Honolulu	State HI	Amount of Each Receipt this Period 300.00	
Zip Code 96846-6000		FEC ID number of contributing federal political committee. C	
Name of Employer Bank of Hawaii	Occupation Vice Chairman & CFO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00		

Full Name (Last, First, Middle Initial) C. Mr. Thomas Koide		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2006	
Mailing Address PO Box 2900		Transaction ID: SA11A1.9701	
City Honolulu	State HI	Amount of Each Receipt this Period 100.00	
Zip Code 96846-6000		FEC ID number of contributing federal political committee. C	
Name of Employer Bank of Hawaii	Occupation Executive Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

SUBTOTAL of Receipts This Page (optional) ▶	500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 15
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Pacific Century Financial Corp. Special Political Education Committee

Full Name (Last, First, Middle Initial) A. Mr. Allan Landon		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2006	
Mailing Address P.O. Box 2900		Transaction ID: SA11A1.9702	
City Honolulu	State HI	Amount of Each Receipt this Period 600.00	
Zip Code 96846-6000		FEC ID number of contributing federal political committee. C	
Name of Employer Bank of Hawaii	Occupation Chairman, CEO & President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00		

Full Name (Last, First, Middle Initial) B. Mr. Ronald Leach		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2006	
Mailing Address PO Box 2900		Transaction ID: SA11A1.9704	
City Honolulu	State HI	Amount of Each Receipt this Period 100.00	
Zip Code 96846-6000		FEC ID number of contributing federal political committee. C	
Name of Employer Bank of Hawaii	Occupation Executive Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) C. Toby Martyn		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2006	
Mailing Address		Transaction ID: SA11A1.9708	
City	State	Amount of Each Receipt this Period 300.00	
Zip Code		FEC ID number of contributing federal political committee. C	
Name of Employer	Occupation Senior Executive Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 15
	<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)
Pacific Century Financial Corp. Special Political Education Committee

Full Name (Last, First, Middle Initial) A. Ms. Janet Mason		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2006	
Mailing Address P.O. Box 2900		Transaction ID: SA11A1.9710	
City State Zip Code Honolulu HI 96846		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Bank of Hawaii Senior Vice President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Mr. Thomas McCurdy		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2006	
Mailing Address PO Box 2900		Transaction ID: SA11A1.9713	
City State Zip Code Honolulu HI 96846-6000		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Bank of Hawaii Vice President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Mr. Greg Noji		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2006	
Mailing Address PO Box 2900		Transaction ID: SA11A1.9719	
City State Zip Code Honolulu HI 96846-6000		Amount of Each Receipt this Period 60.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Bank of Hawaii Vice President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional) ▶	260.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 15
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Pacific Century Financial Corp. Special Political Education Committee

Full Name (Last, First, Middle Initial) A. Ms. Stephanie Saito		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2006
Mailing Address P.O. Box 2900		Transaction ID: SA11A1.9722
City Honolulu State HI Zip Code 96846	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Bank of Hawaii	Occupation Senior Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Ms. Mary Sellers		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2006
Mailing Address PO Box 2900		Transaction ID: SA11A1.9724
City Honolulu State HI Zip Code 96846-6000	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Bank of Hawaii	Occupation Executive Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Mr. Joji Seta		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2006
Mailing Address PO Box 2900		Transaction ID: SA11A1.9725
City Honolulu State HI Zip Code 96846-6000	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Bank of Hawaii	Occupation Senior Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 15
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Pacific Century Financial Corp. Special Political Education Committee

A. Full Name (Last, First, Middle Initial) Ms Donna Tanoue		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2006	
Mailing Address PO Box 2900		Transaction ID: SA11A1.9731	
City State Zip Code Honolulu HI 96846		Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Bank of Hawaii		Occupation Vice Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1200.00	

B. Full Name (Last, First, Middle Initial) Mr. David Thomas		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2006	
Mailing Address P.O. Box 2900		Transaction ID: SA11A1.9732	
City State Zip Code Honolulu HI 96846-6000		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Bank of Hawaii		Occupation Vice Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 800.00	

C. Full Name (Last, First, Middle Initial) Mr. Curtis Tom		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2006	
Mailing Address 4455 Rice St.		Transaction ID: SA11A1.9733	
City State Zip Code Lihue HI 96766		Amount of Each Receipt this Period 80.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Bank of Hawaii		Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 320.00	

SUBTOTAL of Receipts This Page (optional) ▶	580.00
TOTAL This Period (last page this line number only) ▶	3170.00

**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)

PAGE 13 / 15

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
Pacific Century Financial Corp. Special Political Education Committee

Full Name (Last, First, Middle Initial) A. Mr. Ed Case		Transaction ID: SB23.9668	
Mailing Address P.O. Box 4618		Date of Disbursement 07 / 26 / 2006	
City Kaneohe	State HI	Zip Code 96744	Amount of Each Disbursement this Period 500.00
Purpose of Disbursement Cash for Senate		Category/ Type	
Candidate Name Mr. Ed Case			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: HI	District: 2		

Full Name (Last, First, Middle Initial) B. Mr. Ed Case		Transaction ID: SB23.9679	
Mailing Address P.O. Box 4618		Date of Disbursement 09 / 01 / 2006	
City Kaneohe	State HI	Zip Code 96744	Amount of Each Disbursement this Period 300.00
Purpose of Disbursement Case for Senate		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: HI	District: 2		

Full Name (Last, First, Middle Initial) C. Ms. Mazie Hirono		Transaction ID: SB23.9667	
Mailing Address P. O. Box 677		Date of Disbursement 07 / 07 / 2006	
City Honolulu	State HI	Zip Code 96809	Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement US House of Representatives, District II		Category/ Type	
Candidate Name Ms. Mazie Hirono			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: HI	District: 2		

SUBTOTAL of Disbursements This Page (optional)	2800.00
TOTAL This Period (last page this line number only)	2800.00

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)

PAGE 14 / 15

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Pacific Century Financial Corp. Special Political Education Committee

Full Name (Last, First, Middle Initial) A. Mr. Alan Arakawa		Transaction ID: SB29.9670 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6
Mailing Address 407 Kamehameha Avenue		Amount of Each Disbursement this Period 600.00
City Kahului State HI Zip Code 96832	Category/ Type	
Purpose of Disbursement Friends of Alan Arakawa		
Candidate Name Mr. Alan Arakawa		
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) ▼	

Full Name (Last, First, Middle Initial) B. Democratic Party Coordinated Campaign Committee		Transaction ID: SB29.9678 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 6
Mailing Address 839 Kapiolani Blvd.		Amount of Each Disbursement this Period 2000.00
City Honolulu State HI Zip Code 96813	Category/ Type	
Purpose of Disbursement Coordinated Campaign of the Democratic C		
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 checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Hawaii Republican Party		Transaction ID: SB29.9746 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 725 Kapiolani Blvd., #C-105		Amount of Each Disbursement this Period 5000.00
City Honolulu State HI Zip Code 96813	Category/ Type	
Purpose of Disbursement Hawaii Republican Party		
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) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	7600.00
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)

PAGE 15 / 15

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Pacific Century Financial Corp. Special Political Education Committee

Full Name (Last, First, Middle Initial) A. Mr. Michael Magaoay		Transaction ID: SB29.9669 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 9 / 2 0 0 6	
Mailing Address P.O. Box 977		Amount of Each Disbursement this Period 300.00	
City Waialua State HI Zip Code 96791	Purpose of Disbursement Friends for Michael Magaoay	Category/ Type	
Candidate Name Mr. Michael Magaoay	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: HI District:			

Full Name (Last, First, Middle Initial) B. Yvonne P. Perry		Transaction ID: SB29.9674 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 6	
Mailing Address 1005 Ala Liliroi St., Apt. W205		Amount of Each Disbursement this Period 100.00	
City Honolulu State HI Zip Code 96818	Purpose of Disbursement Yvonne P. Perry for State House	Category/ Type	
Candidate Name Yvonne P Perry	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. J Yoshimoto		Transaction ID: SB29.9676 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 6	
Mailing Address 110 Hualalai Street		Amount of Each Disbursement this Period 200.00	
City Hilo State HI Zip Code 96720	Purpose of Disbursement friends of J. Yoshimoto	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	8200.00