NONA: ON: HT ON: OOMORNAD

FEC FORM

STATEMENT OF ORGANIZATION

RECEIVED EC MAIL CENTER

FORM 1	ONGANIZ	ATION	2022 FEB 10 PM 4: 00 Office Use Only	
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
HĄWAJIAN TELĘCOMM	UNIÇATIONS INC FED	PAC		
ADDRESS (number and street)	11,77 BISHOP STREE	T SUITE 44		
		<u></u>		
	CITA ▼ HÓƯOՐՈՐՈ		HI 96813 2808 STATE ▲ ZIP CODE ▲	
COMMITTEE'S E-MAIL ADDR	ESS		•	
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,	Optional Second E-Mail Ad	ldress		
COMMITTEE'S WEB PAGE AL (Check if address is changed)	DDRESS (URL)			
2. DATE 01 28 2022				
3. FEC IDENTIFICATION N	UMBER ▶ C 0	04134401		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined	this Statement and to the best	t of my knowledge and belief	it is true, correct and complete.	
Type or Print Name of Treasur	JEANNINE A. SOL	JKI		
Signature of Treasurer	Jor-		Date 01 28 2022	
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.				
Office Use Only		For further information Federal Election Commi Toll Free 800-424-9530 Local 202-694-1100	ECL. ELIBIN I	

FEC F	orm 1 (Revised 02/2009)	Page 2
TYPE OF (COMMITTEE	
Candidat	e Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Com information below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliat	Office Sought: House Senate President	State District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co	mmittee:	
(d)		(Democratic, Republican, etc.) Party.
Political A	Action Committee (PAC):	
(e) 🔀	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected organization is a:
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fun	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political
h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
Con	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number C	
3.	FEC ID number	
4		W & W W

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Write or Type Committee Name	•	
6. Name of Any Connected C	Organization, Affiliated Committee, Joint Fundralsing Representative, or Leadershi	p PAC Sponsor
НАМАЦАЙ ТЕЦСОМ	<u> </u>	
Mailing Address	11/77 BISHOP STREET	
	HФN O U U	2808
	CITY STATE Z	IP CODE
Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representative Lead	dership PAC Sponsor
 Custodian of Records: Ider books and records. 	ntify by name, address (phone number optional) and position of the person in poss	ession of committee
Full Name UEANNI	NE A., SOUKI	
Mailing Address	11,77,BISHOP STREET SUITE 44	
		1 1 1 1 1 1
	HONOLULU 96,813	
Title or Position	CITY STATE Z	IP CODE
TREASURER	Telephone number [808,] - [546	68687
8. Treasurer: List the name an any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the name assistant treasurer).	e and address of
Full Name of Treasurer UEANNI	NE A., SOUKI	
Mailing Address	1177 BISHOP STREET SUITE 44	
	HONOLULU HI 96813	
Title or Position	CITY STATE Z Telephone number 808 546	IP CODE

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Full Name of Designated Agent			
Mailing Address			
•	СІТҮ	STATE	ZIP CODE
Title or Position			
		Telephone number	
	HAWAIIAN TEL FEDERAL CREDIT UNION	V	
Mailing Address	1138 NORTH KING STREET		<u> </u>
		1 1 1 1 1 1 1 1	<u> </u>
	HONOLULU,	HI.	96817 , , , , , , , , , , , , , , , , , , ,
	CITY	STATE	ZIP CODE
Name of Bank,	Depository, etc.		
Mailing Address	<u> </u>		
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FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page ____ **of** ____

(g) or (h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Join	nt Fundraising Representativ	e, or Leadership PAC Sponsor
[:		1 1 1 1 1 1 1 1 1	
Mailing Address			
			
. Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Joint Fundraising Represent	ative Leadership PAC Sponso
Designated Agent: Identi	y by name, address (phone number – opt	ional)	
	fy by name, address (phone number – opt	ional)	
Full Name	y by name, address (phone number – opt		
Full Name	CITY	cional)	ZIP CODE A
Full Name Mailing Address	CITY		
Full Name Mailing Address TITLE OR POSITION	CITY A	STATE A Telephone Number	ZIP CODE ▲
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or many safety deposit boxes or many safety deposite boxes.	CITY A	STATE A Telephone Number	ZIP CODE ▲
Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	CITY A	STATE A Telephone Number	ZIP CODE ▲

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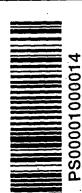
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Next Busin	ess Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Receipt or Postmarked
Spu	2/14/20
PREPARER (3/2015)	DATE PREPARED