



# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Democratic Party of Hawaii

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2026"/>		<input type="text" value="66711.07"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="66711.07"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="24420.68"/>	<input type="text" value="24420.68"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="91131.75"/>	<input type="text" value="91131.75"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="30864.69"/>	<input type="text" value="30864.69"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="60267.06"/>	<input type="text" value="60267.06"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="110790.94"/>	

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

For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov)

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Democratic Party of Hawaii**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	250.00	250.00
(ii) Unitemized .....	727.91	727.91
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	977.91	977.91
(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) .....	977.91	977.91
12. Transfers From Affiliated/Other Party Committees.....	20441.17	20441.17
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	3001.60	3001.60
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	24420.68	24420.68
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	24420.68	24420.68

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	4070.91	4070.91
(ii) Non-Federal Share.....	23068.52	23068.52
(b) Other Federal Operating Expenditures .....	3350.26	3350.26
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	30489.69	30489.69
22. Transfers to Affiliated/Other Party Committees.....	375.00	375.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	30864.69	30864.69
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7796.17	7796.17

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	977.91	977.91
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	977.91	977.91
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	7421.17	7421.17
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	7421.17	7421.17

: 97 `A =G7 9 @C B9 CI G`H9 LH`F9 @ H98 `HC `5 `F9 DCFH`G7 <98 I @ `CF `H9 A =N5 HCB

Form/Schedule: F3XA  
Transaction ID :

(1) All payroll related expenses reported on Schedule H4 supporting Line 21(a) were for employees that spent 25% or less of their compensated time on Federal Election Activity. (2) All fringe benefits paid on Schedule H4 are for said employees working less than 25% of their time on Federal Election Activity. (3) No transfers from the DNC, the DSCC, or the DCCC were designated for a particular candidate, nor were they transferred to fund a particular activity. (4) All fundraising activity was for the benefit of the Committee and was not attributable to any candidate for federal office. (5) Any receipts on Schedule A, supporting Lines 15 or 17, were assessed at the usual and normal charge.

Form/Schedule:  
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 24
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Democratic Party of Hawaii**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Oshima, Leighton, K., ,

Mailing Address 2443 Halekoa Dr

City Honolulu	State HI	Zip Code 96821-1039
------------------	-------------	------------------------

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

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Attorney
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 23 / 2026

**Transaction ID : 9497225**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

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

Aggregate Year-to-Date ▼  
717.91

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 31 / 2026

**Transaction ID : 9497282E**

Amount of Each Receipt this Period  
717.91

Memo Item

Note: Total contribution(s) earmarked through this organization.

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

Mailing Address

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> This Period (last page this line number only).....	250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 24
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Democratic Party of Hawaii**

**A. Democratic National Committee / DNC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Democratic National Committee / DNC

Mailing Address 430 S Capitol St SE

City Washington	State DC	Zip Code 20003-4024
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FEC ID number of contributing federal political committee. **C** C00010603

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
20441.17

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		27		2026

**Transaction ID : 9762453**

Amount of Each Receipt this Period  
17500.00

Memo Item

Unlimited Transfer

**B. Democratic National Committee / DNC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Democratic National Committee / DNC

Mailing Address 430 S Capitol St SE

City Washington	State DC	Zip Code 20003-4024
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FEC ID number of contributing federal political committee. **C** C00010603

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
20441.17

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		31		2026

**Transaction ID : 9762441**

Amount of Each Receipt this Period  
2941.17

Memo Item

In-Kind: Online Voter File Access

**C.**

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

Mailing Address

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

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

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	20441.17
<b>TOTAL</b> This Period (last page this line number only).....	20441.17

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 24
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Democratic Party of Hawaii**

**A. Friends Of Derek Turbin**

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

Mailing Address PO Box 2493

City Honolulu	State HI	Zip Code 96804-2493
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		23		2026

**Transaction ID : 9497227**

Amount of Each Receipt this Period  
1200.00

Memo Item

Voter File Access at Fair Market Value

**B. People For Pacarro**

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

Mailing Address PO Box 240289

City Honolulu	State HI	Zip Code 96824-0289
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
900.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		25		2026

**Transaction ID : 9431284**

Amount of Each Receipt this Period  
900.00

Memo Item

Voter File Access at Fair Market Value

**C. Vote For Troy Person**

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

Mailing Address PO Box 1389

City Kaneohe	State HI	Zip Code 96744-1389
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FEC ID number of contributing federal political committee. **C**

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

Aggregate Year-to-Date ▼  
900.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01		04		2026

**Transaction ID : 9301008**

Amount of Each Receipt this Period  
900.00

Memo Item

Voter File Access at Fair Market Value

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	3000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Democratic Party of Hawaii**

Full Name (Last, First, Middle Initial)

**A. Democratic National Committee / DNC**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
01		31		2026

Mailing Address 430 S Capitol St SE

City  
Washington

State  
DC

Zip Code  
20003-4024

FEC Identification Number

C	C00010603
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**Transaction ID : 500413738**

Amount of Each Disbursement this Period

2941.17
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Purpose of Disbursement

In-Kind: Online Voter File Access

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

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

Mailing Address

City

State

Zip Code

FEC Identification Number

C	
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Amount of Each Disbursement this Period

--

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

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

Mailing Address

City

State

Zip Code

FEC Identification Number

C	
---	--

Amount of Each Disbursement this Period

--

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Memo Item

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

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

2941.17
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2941.17
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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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)

**Democratic Party of Hawaii**

Full Name (Last, First, Middle Initial)

### A. Association Of State Democratic Committees

Mailing Address 430 S Capitol St SE

City  
Washington

State  
DC

Zip Code  
20003-4024

Purpose of Disbursement

Unlimited Transfer

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

**C** C00259481

**Transaction ID : 500413746**

Amount of Each Disbursement this Period

375.00

Memo Item

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

Memo Item

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

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

375.00

375.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 12 OF 24
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Democratic Party of Hawaii**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Department Of The Treasury - IRS</b>			Nature of Debt (Purpose): Federal Taxes
Mailing Address PO Box 105083			
City Atlanta	State GA	Zip Code 30348-5083	

Outstanding Balance Beginning This Period <input type="text" value="5726.42"/>	<b>Transaction ID : 1250000102</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="5726.42"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Fontheim Partners, PC</b>			Nature of Debt (Purpose): Contribution Refund per FEC Audit for 2012
Mailing Address 888 17Th St NW Ste 1200			
City Washington	State DC	Zip Code 20006-3320	

Outstanding Balance Beginning This Period <input type="text" value="19040.96"/>	<b>Transaction ID : 1250000077</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="19040.96"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Galiher, Gary, O, ,</b>			Nature of Debt (Purpose): Contribution Refund per FEC Audit for 2012
Mailing Address 610 Ward Ave Ste 200			
City Honolulu	State HI	Zip Code 96814-3308	

Outstanding Balance Beginning This Period <input type="text" value="5000.00"/>	<b>Transaction ID : 1250000143</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="5000.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="29767.38"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 13 OF 24
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Democratic Party of Hawaii**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Guide.Net, Inc.</b>			Nature of Debt (Purpose): Membership Database; Debt added per 2011/2012 Audit
Mailing Address PO Box 160905			
City Honolulu	State HI	Zip Code 96816-0921	

Outstanding Balance Beginning This Period <input type="text" value="523.56"/>	<b>Transaction ID : 1250000134</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="523.56"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Lockheed Martin</b>			Nature of Debt (Purpose): Contribution Refund
Mailing Address 6801 Rockledge Dr			
City Bethesda	State MD	Zip Code 20817-1803	

Outstanding Balance Beginning This Period <input type="text" value="10000.00"/>	<b>Transaction ID : 1250000118</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="10000.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>McKelvey For House</b>			Nature of Debt (Purpose): Contribution Refund per FEC Audit for 2012
Mailing Address PO Box 847			
City Lahaina	State HI	Zip Code 96767-0847	

Outstanding Balance Beginning This Period <input type="text" value="500.00"/>	<b>Transaction ID : 1250000162</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="500.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="11023.56"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 14 OF 24
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Democratic Party of Hawaii**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Southern Company Services, Inc.</b>			Nature of Debt (Purpose): Contribution Refund per FEC Audit for 2012
Mailing Address 241 Ralph McGill Blvd NE			
City Atlanta	State GA	Zip Code 30308-3374	

Outstanding Balance Beginning This Period 15000.00	<b>Transaction ID : 1250000104</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 15000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Walmart</b>			Nature of Debt (Purpose): Contribution Refund per FEC Audit for 2012
Mailing Address 702 SW 8Th St			
City Bentonville	State AR	Zip Code 72716-6209	

Outstanding Balance Beginning This Period 30000.00	<b>Transaction ID : 1250000074</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 30000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Wellcare Management Group, Inc.</b>			Nature of Debt (Purpose): Contribution Refund per FEC Audit for 2012
Mailing Address 280 Broadway Ste 3			
City Newburgh	State NY	Zip Code 12550-8278	

Outstanding Balance Beginning This Period 25000.00	<b>Transaction ID : 1250000068</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 25000.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	70000.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	110790.94
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	110790.94

**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)

Democratic Party of Hawaii

Transaction ID : 99M

**USE ONLY ONE SECTION, A or B**

**A. State and Local Party Committees**

**Fixed Percentage (select one)**

- \_\_\_\_\_ Presidential-Only Election Year (28% Federal)
- \_\_\_\_\_ Presidential and Senate Election Year (36% Federal)
- \_\_\_\_\_ Senate-Only Election Year (21% Federal)
- Non-Presidential and Non-Senate Election Year (15% Federal)

**B. Separate Segregated Funds and Nonconnected Committees**

**Indicate ratio below**

Federal.....  %

Nonfederal .....  %

This ratio applies to (check all that apply):

Administrative       Generic Voter Drive       Public Communications Referencing Party Only

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Form A: Full Name (Last, First, Middle Initial) Transaction ID : 500413743. ADP, Inc. Mailing Address 711 Kapiolani Blvd. City Honolulu, State HI, Zip Code 96813-5237. Purpose of Disbursement: Payroll Fees. Activity or Event Identifier: Administrative. Allocated Activity or Event: Administrative. Date: 01/09/2026. FEDERAL SHARE: 12.79, NONFEDERAL SHARE: 72.49, TOTAL AMOUNT: 85.28.

Form B: Full Name (Last, First, Middle Initial) Transaction ID : 500410068. ADP, Inc. Mailing Address 711 Kapiolani Blvd. City Honolulu, State HI, Zip Code 96813-5237. Purpose of Disbursement: Payroll - See Memos. Activity or Event Identifier: Administrative. Allocated Activity or Event: Administrative. Date: 01/15/2026. FEDERAL SHARE: 360.68, NONFEDERAL SHARE: 2043.84, TOTAL AMOUNT: 2404.52.

Form C: Full Name (Last, First, Middle Initial) Transaction ID : 500410067. Roque, Philippe, , . Mailing Address 627 South St. City Honolulu, State HI, Zip Code 96813-5050. Purpose of Disbursement: Payroll. Activity or Event Identifier: Administrative. Allocated Activity or Event: Administrative. Date: 01/15/2026. FEDERAL SHARE: 360.68, NONFEDERAL SHARE: 2043.84, TOTAL AMOUNT: 2404.52.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 373.47, 2116.33, 2489.80.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values are empty.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Form A: Full Name (Last, First, Middle Initial) Transaction ID : 500410069. ADP, Inc. Mailing Address 711 Kapiolani Blvd. City Honolulu, State HI, Zip Code 96813-5237. Purpose of Disbursement: Payroll Taxes. Activity or Event Identifier: Administrative. Allocated Activity or Event: Administrative. Date: 01/15/2026. FEDERAL SHARE: 162.19, NONFEDERAL SHARE: 919.09, TOTAL AMOUNT: 1081.28.

Form B: Full Name (Last, First, Middle Initial) Transaction ID : 500413744. ADP, Inc. Mailing Address 711 Kapiolani Blvd. City Honolulu, State HI, Zip Code 96813-5237. Purpose of Disbursement: Payroll Fees. Activity or Event Identifier: Administrative. Allocated Activity or Event: Administrative. Date: 01/23/2026. FEDERAL SHARE: 12.79, NONFEDERAL SHARE: 72.49, TOTAL AMOUNT: 85.28.

Form C: Full Name (Last, First, Middle Initial) Transaction ID : 500412319. ADP, Inc. Mailing Address 711 Kapiolani Blvd. City Honolulu, State HI, Zip Code 96813-5237. Purpose of Disbursement: Payroll - See Memos. Activity or Event Identifier: Administrative. Allocated Activity or Event: Administrative. Date: 01/30/2026. FEDERAL SHARE: 360.68, NONFEDERAL SHARE: 2043.85, TOTAL AMOUNT: 2404.53.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 535.66, 3035.43, 3571.09.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values are empty.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Form A: Full Name (Last, First, Middle Initial) Transaction ID : 500412318. Includes fields for Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details.

Form B: Full Name (Last, First, Middle Initial) Transaction ID : 500412320. Includes fields for Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details.

Form C: Full Name (Last, First, Middle Initial) Transaction ID : 500413762. Includes fields for Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 912.19, 5169.08, 6081.27.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values are currently blank.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Form A: Full Name (Last, First, Middle Initial) Transaction ID : 500413741. Eo Resource LLC. Mailing Address 200 N Vineyard Blvd Ste A325-531. City Honolulu, State HI, Zip Code 96817-3950. Purpose of Disbursement: Project Management and Data Services. Activity or Event Identifier: Administrative. Allocated Activity or Event: Administrative. Allocated Activity or Event Year-To-Date: 27139.43. Date: 01/01/2026. FEDERAL SHARE: 1466.25, NONFEDERAL SHARE: 8308.75, TOTAL AMOUNT: 9775.00.

Form B: Full Name (Last, First, Middle Initial) Transaction ID : 500413740. Google. Mailing Address 1600 Amphitheatre Pkwy. City Mountain View, State CA, Zip Code 94043-1351. Purpose of Disbursement: Software. Activity or Event Identifier: Administrative. Allocated Activity or Event: Administrative. Allocated Activity or Event Year-To-Date: 27139.43. Date: 01/01/2026. FEDERAL SHARE: 30.34, NONFEDERAL SHARE: 171.96, TOTAL AMOUNT: 202.30.

Form C: Full Name (Last, First, Middle Initial) Transaction ID : 500413758. Guide.Net, Inc. Mailing Address PO Box 160905. City Honolulu, State HI, Zip Code 96816-0921. Purpose of Disbursement: Email Services. Activity or Event Identifier: Administrative. Allocated Activity or Event: Administrative. Allocated Activity or Event Year-To-Date: 27139.43. Date: 01/23/2026. FEDERAL SHARE: 157.07, NONFEDERAL SHARE: 890.05, TOTAL AMOUNT: 1047.12.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 1653.66, 9370.76, 11024.42.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values are empty.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

A. Full Name (Last, First, Middle Initial) Transaction ID : 500413747
Hawaii Employers Council
Mailing Address PO Box 29699
City Honolulu State HI Zip Code 96820-2099
Purpose of Disbursement: Membership Dues
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date: 27139.43
Date: 01 / 12 / 2026
FEDERAL SHARE: 49.88 NONFEDERAL SHARE: 282.62 TOTAL AMOUNT: 332.50

B. Full Name (Last, First, Middle Initial) Transaction ID : 500413742
Hawaiian Electric Company
Mailing Address PO Box 3978
City Honolulu State HI Zip Code 96812-3978
Purpose of Disbursement: Utilities
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date: 27139.43
Date: 01 / 09 / 2026
FEDERAL SHARE: 35.17 NONFEDERAL SHARE: 199.27 TOTAL AMOUNT: 234.44

C. Full Name (Last, First, Middle Initial) Transaction ID : 500413739
Mailchimp
Mailing Address 675 Ponce De Leon Ave NE Ste 5000
City Atlanta State GA Zip Code 30308-2172
Purpose of Disbursement: Software
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date: 27139.43
Date: 01 / 01 / 2026
FEDERAL SHARE: 11.78 NONFEDERAL SHARE: 66.75 TOTAL AMOUNT: 78.53

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 96.83, 548.64, 645.47

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Form A: Full Name (Last, First, Middle Initial) Transaction ID : 500413749. Includes fields for Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details.

Form B: Full Name (Last, First, Middle Initial) Transaction ID : 500413748. Includes fields for Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details.

Form C: Full Name (Last, First, Middle Initial) Transaction ID : 500413756. Includes fields for Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for SUBTOTAL showing FEDERAL SHARE (384.00), NONFEDERAL SHARE (2176.00), and TOTAL AMOUNT (2560.00).

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for TOTAL This Period showing FEDERAL SHARE, NONFEDERAL SHARE, and TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Form A: Full Name (Last, First, Middle Initial) Transaction ID : 500413750. Includes fields for Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details.

Form B: Full Name (Last, First, Middle Initial) Transaction ID : 500413751. Includes fields for Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details.

Form C: Full Name (Last, First, Middle Initial) Transaction ID : 500413752. Includes fields for Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for SUBTOTAL with columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 47.81, 270.95, 318.76.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for TOTAL with columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 47.81, 270.95, 318.76.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Form A: Full Name (Last, First, Middle Initial) Transaction ID : 500413753. Fisher Hawaii. Mailing Address 690 Pohukaina St. City Honolulu, State HI, Zip Code 96813-5116. Purpose of Disbursement: Office Supplies. Activity or Event Identifier: Administrative. Allocated Activity or Event: Administrative. Date 01/23/2026. FEDERAL SHARE 5.37, NONFEDERAL SHARE 30.42, TOTAL AMOUNT 35.79.

Form B: Full Name (Last, First, Middle Initial) Transaction ID : 500413764. Wix.Com, Inc. Mailing Address 100 Gansevoort St. City New York, State NY, Zip Code 10014-1477. Purpose of Disbursement: Software. Activity or Event Identifier: Administrative. Allocated Activity or Event: Administrative. Date 01/28/2026. FEDERAL SHARE 7.21, NONFEDERAL SHARE 40.86, TOTAL AMOUNT 48.07.

Form C: Full Name (Last, First, Middle Initial) Transaction ID : 500413755. Xiber Hawaii (Formerly HDT Hawaii Dialogix Telecom). Mailing Address PO Box 29960. City Honolulu, State HI, Zip Code 96820-2360. Purpose of Disbursement: Utilities. Activity or Event Identifier: Administrative. Allocated Activity or Event: Administrative. Date 01/23/2026. FEDERAL SHARE 36.90, NONFEDERAL SHARE 209.13, TOTAL AMOUNT 246.03.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 44.11, 249.99, 294.10.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values are empty.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
Democratic Party of Hawaii

Form A: Full Name (Last, First, Middle Initial) Transaction ID : 500413745. Includes fields for Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details.

Form B: Full Name (Last, First, Middle Initial) Transaction ID : 500413763. Includes fields for Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details.

Form C: Full Name (Last, First, Middle Initial) Transaction ID : . Includes fields for Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 23.18, 131.34, 154.52.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 4070.91, 23068.52, 27139.43.