

SECRETARY OF THE SENATE

07 FEB -1 PM 3:01

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

Office Use Only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FB4M5

CASE FOR SENATE

ADDRESS (number and street)

ASO TOWER SUITE 2200

(Check if address is changed)

(Check if address is changed)

11011 BISHOP ST

HONOLULU HI

HI

96813-1

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

JCASE@CARLSMITH.COA

COMMITTEE'S WEB PAGE ADDRESS (URL)

WWW.EDCASE.COM

2. DATE

01 30 2007

3. FEC IDENTIFICATION NUMBER

C00419150

4. IS THIS STATEMENT

()

NEW (N)

OR

(X)

AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

JAMES H. CASE

Signature of Treasurer

James H. Case

Date

01 30 2007

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

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only

For further information contact: Federal Election Commission, Toll Free 800-431-9530, Local 202-694-1109

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FETAM08/P02

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6. TYPE OF COMMITTEE (Check One)

- (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. (Complete the candidate information below.)

Name of Candidate EDWARD ESPENHETZ CASE

Candidate Party Affiliation: DEM REP LIB IND OTH

Office Sought: House Senate President

State: HI District: 1

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

- (d) This committee is a _____ (National, State or subordinate) committee of the _____ (Democratic, Republican, etc.) Party.

- (e) This committee is a separate segregated fund.

- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

7. Name of Any Connected Organization or Affiliated Committee

Mailing Address _____

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship _____

Type of Connected Organization:

- Corporation
- Corporation w/o Capital Stock
- Labor Organization
- Membership Organization
- Trade Association
- Cooperative

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Write or Type Committee Name

CASE FOR SEBATE

7. Custodian of Records: Identify by name, address (phone number - optional) and position of the person in possession of committee books and records.

Full Name JAMES H. CASE HEARST

Mailing Address 1313 TOWER SUITE 2200

110 111 BISHOP ST.

ANNAPOLIS MD ME 21403

Title or Position CITY STATE ZIP CODE

CUSTODIAN OF RECORDS Telephone number 410-523-2501

8. Treasurer: List the name and address (phone number - optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer JAMES HEARST CASE

Mailing Address 1313 TOWER SUITE 2200

110 111 BISHOP ST.

ANNAPOLIS MD ME 21403

Title or Position CITY STATE ZIP CODE

TREASURER Telephone number

Full Name of Designated Agent

Mailing Address

Title or Position CITY STATE ZIP CODE

Telephone number

REWARD FOR

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B. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

BANK OF HAWAII

Mailing Address

111 S. KING ST.

HONOLULU

HI

96813

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

USPS FIRST CLASS MAIL _____
Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL _____
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION 02-01-07
Date of Receipt

POSTMARK ILLEGIBLE NO POSTMARK

FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

PREPARER RD DATE PREPARED 02-01-07

27020043478

27020043479

