



**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

Abercrombie for Congress

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	87752.00	1324845.14
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	4910.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	87752.00	1319935.14
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	44866.26	771337.97
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	2131.05
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	44866.26	769206.92
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1241785.28	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	2022.50	

**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  
Abercrombie for Congress

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

**I. RECEIPTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than  
Political Committees

(i) Itemized (use Schedule A).....

27100.00

636626.68

(ii) Unitemized.....

402.00

21401.00

(iii) TOTAL of contributions

27502.00

658027.68

from individuals..... ▶

0.00

77.46

(b) Political Party Committees.....

60250.00

666740.00

(c) Other Political Committees  
(such as PACS).....

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

87752.00

1324845.14

(add Lines 11(a)(iii), (b), (c), and (d))

12. TRANSFERS FROM OTHER  
AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the  
Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING  
EXPENDITURES  
(Refunds, Rebates, etc.).....

0.00

2131.05

15. OTHER RECEIPTS  
(Dividends, Interest, etc.).....

2021.36

56889.68

16. **TOTAL RECEIPTS** (add Lines  
11(e), 12, 13(c), 14, and 15)  
(Carry Total to Line 24, page 4)..... ▶

89773.36

1383865.87

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	44866.26	771337.97
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	1900.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	3010.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	4910.00
21. OTHER DISBURSEMENTS.....	51400.00	65593.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	96266.26	841840.97

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1248278.18
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	89773.36
25. SUBTOTAL (add Line 23 and Line 24).....	1338051.54
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	96266.26
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1241785.28

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 / 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)  
Abercrombie for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Ralph M. Alford		Date of Receipt MM / DD / YYYY 09 / 26 / 2008
	Mailing Address 3207 Chichester Lane		<b>Transaction ID:</b> 81003.C23383
	City State Zip Code Fairfax VA 22031	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
	Name of Employer Self-Employed Occupation Consultant	Election Cycle-to-Date 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	1000.00

<b>B.</b>	Full Name (Last, First, Middle Initial) John Sinclair Grove		Date of Receipt MM / DD / YYYY 09 / 19 / 2008
	Mailing Address 2751 Kapiolani Blvd #406		<b>Transaction ID:</b> 81003.C23362
	City State Zip Code Honolulu HI 96826	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
	Name of Employer University of Hawaii Occupation Faculty	Election Cycle-to-Date 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	300.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Terry R. Head		Date of Receipt MM / DD / YYYY 09 / 18 / 2008
	Mailing Address 11411 Potomac Road		<b>Transaction ID:</b> 81027.C23458
	City State Zip Code Mason Neck VA 22079	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
	Name of Employer Household Goods Forwarders Occupation Trade Assn President	Election Cycle-to-Date 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	750.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) George W. Pasha, IV		Date of Receipt MM / DD / YYYY 09 / 30 / 2008
	Mailing Address 19 Westgate Drive		Transaction ID: 81003.C23396
	City State Zip Code San Rafael CA 94903-1006	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00
	Name of Employer The Pasha Group	Occupation President/CEO	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Joseph G. Pickard		Date of Receipt MM / DD / YYYY 09 / 30 / 2008
	Mailing Address 47-433 Hui Lo Street		Transaction ID: 81013.C23415
	City State Zip Code Kaneohe HI 96744	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2300.00
	Name of Employer Environet Inc.	Occupation Engineer	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4300.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) The Mohegan Tribe		Date of Receipt MM / DD / YYYY 09 / 20 / 2008
	Mailing Address 5 Crow Hill Road		Transaction ID: 81027.C23457
	City State Zip Code Uncasville CT 06382	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00
	Name of Employer N/A	Occupation N/A	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Elissa Pickard	Date of Receipt MM / DD / YYYY 09 / 19 / 2008
	Mailing Address 47-433 Hui Lo Street	<b>Transaction ID:</b> 81003.C23361
	City Kaneohe State HI Zip Code 96744	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Dept of Education Occupation Librarian Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Elissa Pickard	Date of Receipt MM / DD / YYYY 09 / 19 / 2008
	Mailing Address 47-433 Hui Lo Street	<b>Transaction ID:</b> 81003.C23360
	City Kaneohe State HI Zip Code 96744	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Dept of Education Occupation Librarian Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Salt River Pima Maricopa Comm	Date of Receipt MM / DD / YYYY 09 / 12 / 2008
	Mailing Address 10005 E. Osborn Road	<b>Transaction ID:</b> 80912.C23347
	City Scottsdale State AZ Zip Code 85256	Amount of Each Receipt this Period 2300.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer N/A Occupation N/A Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>4600.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) James S.W. Drewry	Date of Receipt MM / DD / YYYY 09 / 26 / 2008
	Mailing Address 3317 Wessynton Way	<b>Transaction ID:</b> 81003.C23387
	City State Zip Code Alexandria VA 22309-2228	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Blank Rome, Govt Relations LL	Occupation Principal	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 750.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Roberto R. Llames	Date of Receipt MM / DD / YYYY 09 / 26 / 2008
	Mailing Address 8300 Boone Blvd Ste 500	<b>Transaction ID:</b> 81003.C23385
	City State Zip Code Vienna VA 22182	Amount of Each Receipt this Period 750.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Pathway Strategies LLC	Occupation Principal	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 750.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) James McAleese	Date of Receipt MM / DD / YYYY 09 / 09 / 2008
	Mailing Address 19595 Aberlour Lane	<b>Transaction ID:</b> 80910.C23344
	City State Zip Code Leesburg VA 20175	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer McAleese & Associates, P.- C.	Occupation Attorney/Consultant	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 9 / 42  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

**A.** Full Name (Last, First, Middle Initial)  
Ray Clark

Mailing Address 519 Oronoco Street

City State Zip Code  
Alexandria VA 22314-2305

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Clark Group LLC Member

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
0 9 / 1 9 / 2 0 0 8

**Transaction ID:** 81003.C23359

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Rebecca J. Hudson

Mailing Address P.O. Box 20652

City State Zip Code  
Alexandria VA 22320

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
R. J. Hudson Associates Executive

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
0 9 / 1 9 / 2 0 0 8

**Transaction ID:** 81003.C23357

Amount of Each Receipt this Period  
2300.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Rebecca J. Hudson

Mailing Address P.O. Box 20652

City State Zip Code  
Alexandria VA 22320

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
R. J. Hudson Associates Executive

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
0 9 / 1 9 / 2 0 0 8

**Transaction ID:** 81003.C23358

Amount of Each Receipt this Period  
2000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 5300.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Brian M. O'Brien	Date of Receipt MM / DD / YYYY 09 / 19 / 2008
	Mailing Address 4-1552 Kuhio Hwy	<b>Transaction ID:</b> 81003.C23363
	City State Zip Code Kapaa HI 96746	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Self-Employed Chiropractor	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Steven R. Ross	Date of Receipt MM / DD / YYYY 09 / 26 / 2008
	Mailing Address 1333 New Hampshire Ave, NW Ste 400	<b>Transaction ID:</b> 81003.C23382
	City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Akin Gump Strauss Hauer & Feld Partner	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael D. Ryan	Date of Receipt MM / DD / YYYY 09 / 26 / 2008
	Mailing Address Water Gate West #409 2700 Virginia Ave	<b>Transaction ID:</b> 81003.C23384
	City State Zip Code Washington DC 20037	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation The Livingston Group LLC Principal	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) C. J. Zane	Date of Receipt MM / DD / YYYY 09 / 26 / 2008
	Mailing Address 6302 Dunway Court	<b>Transaction ID:</b> 81003.C23386
	City State Zip Code Mc Lean VA 22101	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Blank Rome, Govt Relations LL	Occupation Senior Principal	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Gordon J. Keene	Date of Receipt MM / DD / YYYY 09 / 26 / 2008
	Mailing Address 10512 19th Ave SE, Ste 300	<b>Transaction ID:</b> 81003.C23388
	City State Zip Code Everett WA 98208	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer ABBA International Inc	Occupation Intl Freight Forwarder	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Glen K. Hayashida	Date of Receipt MM / DD / YYYY 09 / 30 / 2008
	Mailing Address 95-472 Poloahilani Street	<b>Transaction ID:</b> 81003.C23391
	City State Zip Code Mililani HI 96789	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer National Kidney Foundation	Occupation Executive Director	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 42  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

**A.** Full Name (Last, First, Middle Initial)  
Tonia Carlson

Mailing Address 1314 S. King St #1458

City Honolulu State HI Zip Code 96814

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

Name of Employer Hairline Fracture LLC Occupation Member

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2008.00

Date of Receipt 09 / 30 / 2008  
**Transaction ID:** 81003.C23392  
 Amount of Each Receipt this Period 2000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Tobi J. Solidum

Mailing Address 1314 S. King Street #1458

City Honolulu State HI Zip Code 96814

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

Name of Employer Self-Employed Occupation Consultant

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2008.00

Date of Receipt 09 / 30 / 2008  
**Transaction ID:** 81003.C23393  
 Amount of Each Receipt this Period 2000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Paula A. Kelly

Mailing Address 92-227 Ho Alii Place

City Kapolei State HI Zip Code 96707

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

Name of Employer Sea Hawaii, Inc. Occupation Manager

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt 09 / 30 / 2008  
**Transaction ID:** 81013.C23414  
 Amount of Each Receipt this Period 2300.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **6300.00**

**TOTAL** This Period (last page this line number only) ..... ► **27100.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 42
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) American Postal Workers Union PAC		Date of Receipt MM / DD / YYYY 09 / 20 / 2008
	Mailing Address 1300 L Street NW		<b>Transaction ID:</b> 81027.C23455
	City Washington	State DC	Zip Code 20005-4107
	FEC ID number of contributing federal political committee. <b>C</b> C00010322		Amount of Each Receipt this Period 2500.00
	Name of Employer	Occupation	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 10000.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Raytheon PAC		Date of Receipt MM / DD / YYYY 09 / 26 / 2008
	Mailing Address 1100 Wilson Blvd, Ste. #1500		<b>Transaction ID:</b> 81003.C23371
	City Arlington	State VA	Zip Code 22209
	FEC ID number of contributing federal political committee. <b>C</b> C00097568		Amount of Each Receipt this Period 1000.00
	Name of Employer	Occupation	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 9000.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) American Chiropractic Assn PAC		Date of Receipt MM / DD / YYYY 09 / 26 / 2008
	Mailing Address 1701 Clarendon Blvd.		<b>Transaction ID:</b> 81003.C23367
	City Arlington	State VA	Zip Code 22209
	FEC ID number of contributing federal political committee. <b>C</b> C00102764		Amount of Each Receipt this Period 1000.00
	Name of Employer	Occupation	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 7600.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 42  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

**A.** Full Name (Last, First, Middle Initial)  
National Association Realtors PAC

Mailing Address 430 N. Michigan Ave

City State Zip Code  
Chicago IL 60611-4011

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 19 / 2008

**Transaction ID:** 81003.C23356

Amount of Each Receipt this Period  
5000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
United Transportation Union PAC

Mailing Address 14600 Detroit Ave

City State Zip Code  
Cleveland OH 44107

FEC ID number of contributing federal political committee. **C** C00001636

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 29 / 2008

**Transaction ID:** 81004.C23400

Amount of Each Receipt this Period  
5000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Dairy Farmers of America DEPAC

Mailing Address 10220 N. Ambassador Drive

City State Zip Code  
Kansas City MO 64153

FEC ID number of contributing federal political committee. **C** C00001388

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 26 / 2008

**Transaction ID:** 81003.C23376

Amount of Each Receipt this Period  
3000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **13000.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 42  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

**A.** Full Name (Last, First, Middle Initial)  
Natl Assn of Letter Carriers PAC COLPCE  
Mailing Address 100 Indiana Ave NW

City Washington State DC Zip Code 20001-2144

FEC ID number of contributing federal political committee. **C** C00023580

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 09 / 29 / 2008  
**Transaction ID:** 81004.C23399  
 Amount of Each Receipt this Period: 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
UAW V-CAP  
Mailing Address 8000 East Jefferson Ave

City Detroit State MI Zip Code 48214-3963

FEC ID number of contributing federal political committee. **C** C00002840

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

Date of Receipt: 09 / 22 / 2008  
**Transaction ID:** 81004.C23402  
 Amount of Each Receipt this Period: 2000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
United Technologies PAC  
Mailing Address 1401 Eye Street NW, #600

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00035683

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt: 09 / 30 / 2008  
**Transaction ID:** 81003.C23394  
 Amount of Each Receipt this Period: 3000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 6000.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 42  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
Abercrombie for Congress

**A.** Full Name (Last, First, Middle Initial)  
Crowley Maritime Fed PAC

Mailing Address Lake Merritt Towers  
155 Grand Av 9th Fl

City State Zip Code  
Oakland CA 94612

FEC ID number of contributing federal political committee. **C** C00147231

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 26 / 2008

**Transaction ID:** 81003.C23368

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
American Federation of Teachers PAC

Mailing Address 555 New Jersey Ave NW

City State Zip Code  
Washington DC 20001-2029

FEC ID number of contributing federal political committee. **C** C00028860

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 26 / 2008

**Transaction ID:** 81003.C23369

Amount of Each Receipt this Period  
4000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
General Dynamics Voluntary PCP

Mailing Address 2941 Fairview Park Drive #100

City State Zip Code  
Falls Church VA 22042

FEC ID number of contributing federal political committee. **C** C00078451

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 09 / 2008

**Transaction ID:** 80910.C23341

Amount of Each Receipt this Period  
2000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **7000.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 42  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

**A.** Full Name (Last, First, Middle Initial)  
Transportation Trades Dept PAC  
Mailing Address 888 16th Street NW #650  
City Washington State DC Zip Code 20006-4101  
FEC ID number of contributing federal political committee. **C** C00280909  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1500.00  
Date of Receipt 09 / 26 / 2008  
Transaction ID: 81003.C23375  
Amount of Each Receipt this Period 500.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
American Pilots Association PAC  
Mailing Address 499 S. Capitol Street, SW #409  
City Washington State DC Zip Code 20003-4023  
FEC ID number of contributing federal political committee. **C** C00041061  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 8500.00  
Date of Receipt 09 / 20 / 2008  
Transaction ID: 81027.C23456  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Employees of Northrop Grumman PAC  
Mailing Address 1000 Wilson Blvd, Ste. 2300  
City Arlington State VA Zip Code 22209  
FEC ID number of contributing federal political committee. **C** C00088591  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 10000.00  
Date of Receipt 09 / 12 / 2008  
Transaction ID: 80912.C23346  
Amount of Each Receipt this Period 2000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3500.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 18 / 42  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

**A.** Full Name (Last, First, Middle Initial)  
Greenberg Traurig P. A. PAC  
Mailing Address 1221 Brickel Ave.  
City Miami State FL Zip Code 33131  
FEC ID number of contributing federal political committee. **C** C00266585  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 09 / 26 / 2008  
Transaction ID: 81003.C23380  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
General Electric Co. PAC  
Mailing Address 1299 Pennsylvania Ave, NW #900  
City Washington State DC Zip Code 20004-2407  
FEC ID number of contributing federal political committee. **C** C00024869  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 6000.00  
Date of Receipt 09 / 26 / 2008  
Transaction ID: 81003.C23366  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Natl Assn for Uniformed Services PAC  
Mailing Address 5535 Hempstead Way  
City Springfield State VA Zip Code 22151-4010  
FEC ID number of contributing federal political committee. **C** C00086348  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 09 / 26 / 2008  
Transaction ID: 81003.C23377  
Amount of Each Receipt this Period 500.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2500.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

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 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

**A.** Full Name (Last, First, Middle Initial)  
American Chemistry Council PAC

Mailing Address 1300 Wilson Boulevard

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00252338

Name of Employer Occupation  
N/A N/A

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	6	/	2	0	0	8

**Transaction ID:** 81003.C23381

Amount of Each Receipt this Period  
2000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Tesoro Petroleum Corp. PAC

Mailing Address 300 Concord Plaza Drive

City State Zip Code  
San Antonio TX 78216

FEC ID number of contributing federal political committee. **C** C00358366

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	3	/	2	0	0	8

**Transaction ID:** 80915.C23348

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Nat'l Community Pharmacists Assn PAC

Mailing Address 100 Daingerfield Road

City State Zip Code  
Alexandria VA 22314-6302

FEC ID number of contributing federal political committee. **C** C00030809

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	6	/	2	0	0	8

**Transaction ID:** 81003.C23378

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4000.00**

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

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

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

FOR LINE NUMBER: PAGE 20 / 42  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

**A.** Full Name (Last, First, Middle Initial)  
Honeywell International PAC

Mailing Address 101 Constitution Ave, NW, Ste. 500

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt 09 / 09 / 2008  
**Transaction ID:** 80910.C23342  
 Amount of Each Receipt this Period 5000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Williams Companies PAC

Mailing Address 1627 Eye Street, NW, Ste. 900

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00040394

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 09 / 09 / 2008  
**Transaction ID:** 80910.C23340  
 Amount of Each Receipt this Period 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
EADS NA Americans for Comp in Aerospace

Mailing Address 1616 North Fort Myer Drive #1600

City Arlington State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00421230

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt 09 / 26 / 2008  
**Transaction ID:** 81003.C23373  
 Amount of Each Receipt this Period 2000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **8000.00**

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

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

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

FOR LINE NUMBER: PAGE 21 / 42  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

**A.** Full Name (Last, First, Middle Initial)  
EADS NA Americans for Comp in Aerospace  
 Mailing Address 1616 North Fort Myer Drive #1600  
 City Arlington State VA Zip Code 22209  
 FEC ID number of contributing federal political committee. **C** C00421230  
 Name of Employer Occupation  
 Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 6000.00  
 Date of Receipt 09 / 26 / 2008  
**Transaction ID:** 81003.C23374  
 Amount of Each Receipt this Period 1000.00  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
National Concrete Masonry Assn PAC  
 Mailing Address 13750 Sunrise Valley Drive  
 City Herndon State VA Zip Code 20171  
 FEC ID number of contributing federal political committee. **C** C00128975  
 Name of Employer Occupation  
 Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 3000.00  
 Date of Receipt 09 / 12 / 2008  
**Transaction ID:** 80912.C23345  
 Amount of Each Receipt this Period 2000.00  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
National Concrete Masonry Assn PAC  
 Mailing Address 13750 Sunrise Valley Drive  
 City Herndon State VA Zip Code 20171  
 FEC ID number of contributing federal political committee. **C** C00128975  
 Name of Employer Occupation  
 Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 4000.00  
 Date of Receipt 09 / 26 / 2008  
**Transaction ID:** 81003.C23370  
 Amount of Each Receipt this Period 1000.00  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4000.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 42
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) The Dow Chemical Employees PAC		Date of Receipt
	Mailing Address 2030 Dow Center		<input type="checkbox"/> 09 / <input type="checkbox"/> 09 / <input type="checkbox"/> 2008
	City	State	Zip Code
	Midland	MI	48674
	FEC ID number of contributing federal political committee.		Transaction ID: 80910.C23343
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	2000.00
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼			
			Receipt
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) American Physical Therapy Assn PAC		Date of Receipt
	Mailing Address 1111 N. Fairfax Street		<input type="checkbox"/> 09 / <input type="checkbox"/> 25 / <input type="checkbox"/> 2008
	City	State	Zip Code
	Alexandria	VA	22314
	FEC ID number of contributing federal political committee.		Transaction ID: 81003.C23365
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	1000.00
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼			
			Receipt
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) Akin Gump Strauss Hauer & Feld LLP		Date of Receipt
	Mailing Address Civic Action Committee 1333 New Hampshire Ave NW		<input type="checkbox"/> 09 / <input type="checkbox"/> 26 / <input type="checkbox"/> 2008
	City	State	Zip Code
	Washington	DC	20036
	FEC ID number of contributing federal political committee.		Transaction ID: 81003.C23372
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	750.00
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼			
			Receipt
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 42  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

**A.** Full Name (Last, First, Middle Initial)  
Natl Marine Manufacturer Assn BoatPAC

Mailing Address 444 North Capitol St, NW Ste 645

City Washington State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 09 / 26 / 2008  
**Transaction ID:** 81003.C23379  
 Amount of Each Receipt this Period: 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Smith and Wesson Holding Corp PAC

Mailing Address 2100 Roosevelt Ave

City Springfield State MA Zip Code 01104

FEC ID number of contributing federal political committee. **C** C00419051

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 09 / 29 / 2008  
**Transaction ID:** 81004.C23397  
 Amount of Each Receipt this Period: 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Real Estate Investment Trust PAC

Mailing Address 1875 I Street, NW Ste. 600

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00182022

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 09 / 29 / 2008  
**Transaction ID:** 81004.C23398  
 Amount of Each Receipt this Period: 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3000.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 42  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

A.

Full Name (Last, First, Middle Initial)  
United Airlines, Inc. PAC

Mailing Address 1025 Connecticut Ave, NW Ste 1210

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00078261

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 29 / 2008

Transaction ID: 81004.C23401

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	60250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 42	
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) First Hawaiian Bank		Date of Receipt
	Mailing Address 1580 Kapiolani Blvd.		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Honolulu	HI	96814-
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer N/A		Occupation N/A	Transaction ID: 81004.C23411
Receipt For: 2008		Election Cycle-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General	<input type="text" value="56889.68"/>	<input type="text" value="2021.36"/>
<input type="checkbox"/> Other (specify) ▼			Other Receipt
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
			Note: Interest Earned

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="2021.36"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="2021.36"/>

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Irene Isa Takizawa</p> <p>Mailing Address 1239 Olomea Street</p> <p>City Honolulu State HI Zip Code 96817-</p> <p>Purpose of Disbursement Reimb [See Below]</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81003.E4624</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="264.29"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>REIMB [SEE BELOW]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) FedEx Kinkos</p> <p>Mailing Address 2575 S. King Street</p> <p>City Honolulu State HI Zip Code 96826-</p> <p>Purpose of Disbursement Printing Charges</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81003.E4625</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="264.29"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b> MEMO: PRINTING CHARGES</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address P. O. Box 9622</p> <p>City Mission Hills State CA Zip Code 91346-9622</p> <p>Purpose of Disbursement Cellular Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81003.E4619</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="345.12"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>CELLULAR SERVICE</b></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="609.41"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

A.	Full Name (Last, First, Middle Initial) Oceanic Time Warner Cable	Transaction ID: 81003.E4629 Date of Disbursement 09 / 22 / 2008
	Mailing Address P.O. Box 30050	Amount of Each Disbursement this Period 50.09
	City Honolulu State HI Zip Code 96820-0050	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Cable Service Candidate Name	Category/Type
	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) ▼
		CABLE SERVICE

B.	Full Name (Last, First, Middle Initial) Hawaiian Host, Inc.	Transaction ID: 80910.E4611 Date of Disbursement 09 / 09 / 2008
	Mailing Address 15601 South Avalon Blvd.	Amount of Each Disbursement this Period 69.12
	City Gardena State CA Zip Code 90248-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Promotion -Candies Candidate Name	Category/Type
	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) ▼
		PROMOTION -CANDIES

C.	Full Name (Last, First, Middle Initial) William M. Kaneko	Transaction ID: 80912.E4616 Date of Disbursement 09 / 11 / 2008
	Mailing Address 1040 19th Ave	Amount of Each Disbursement this Period 762.41
	City Honolulu State HI Zip Code 96816-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement [See Below] Candidate Name	Category/Type
	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) ▼
		REIMBURSEMENT [SEE BELOW]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>881.62</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

A.	Full Name (Last, First, Middle Initial) Ducs Bistro	Transaction ID: 81004.E4686 Date of Disbursement 09 / 11 / 2008
	Mailing Address 1188 Maunakea Street	Amount of Each Disbursement this Period 98.72
	City Honolulu State HI Zip Code 96817-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Meeting - Meals Candidate Name	<b>[MEMO ITEM]</b> MEMO: MEETING - MEALS
	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) ▼	

B.	Full Name (Last, First, Middle Initial) FedEx Kinkos	Transaction ID: 81004.E4690 Date of Disbursement 09 / 11 / 2008
	Mailing Address 2575 S. King Street	Amount of Each Disbursement this Period 24.13
	City Honolulu State HI Zip Code 96826-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Printing Candidate Name	<b>[MEMO ITEM]</b> MEMO: PRINTING
	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) ▼	

C.	Full Name (Last, First, Middle Initial) Hawaii Prince Hotel	Transaction ID: 81004.E4685 Date of Disbursement 09 / 11 / 2008
	Mailing Address 100 Holomoana Street	Amount of Each Disbursement this Period 440.16
	City Honolulu State HI Zip Code 96815-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Meeting - Meals Candidate Name	<b>[MEMO ITEM]</b> MEMO: MEETING - MEALS
	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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

A.

Full Name (Last, First, Middle Initial)  
Hawaii Prince Hotel

Mailing Address 100 Holomoana Street

City Honolulu State HI Zip Code 96815-

Purpose of Disbursement  
Meeting - Meals  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 81004.E4684  
Date of Disbursement

09 / 11 / 2008

Amount of Each Disbursement this Period

95.86

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEETING - MEALS

B.

Full Name (Last, First, Middle Initial)  
Le Flowers

Mailing Address 2567B S. King Street

City Honolulu State HI Zip Code 96826-

Purpose of Disbursement  
Leis for event  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 81004.E4687  
Date of Disbursement

09 / 11 / 2008

Amount of Each Disbursement this Period

16.75

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

MEMO: LEIS FOR EVENT

C.

Full Name (Last, First, Middle Initial)  
U. S. Postal Service

Mailing Address 1450 Ala Moana Blvd.

City Honolulu State HI Zip Code 96814-

Purpose of Disbursement  
Express Mail  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 81003.E4636  
Date of Disbursement

09 / 25 / 2008

Amount of Each Disbursement this Period

16.50

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

EXPRESS MAIL

SUBTOTAL of Disbursements This Page (optional) ▶

16.50

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) BankCard Center Mailing Address P.O. Box 29450 City Honolulu State HI Zip Code 96820-1850 Purpose of Disbursement Credit Card Payment [See Below] Candidate Name	Transaction ID: 81003.E4640 Date of Disbursement 09 / 29 / 2008
	Amount of Each Disbursement this Period 199.77 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>CREDIT CARD PAYMENT [SEE BELOW]</b>
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) ▼	Category/Type

<b>B.</b> Full Name (Last, First, Middle Initial) FedEx Kinkos Mailing Address 2575 S. King Street City Honolulu State HI Zip Code 96826- Purpose of Disbursement Printing Candidate Name	Transaction ID: 81004.E4698 Date of Disbursement 09 / 29 / 2008
	Amount of Each Disbursement this Period 78.53 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: PRINTING
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) ▼	Category/Type

<b>C.</b> Full Name (Last, First, Middle Initial) Kincaids Mailing Address 1050 Ala Moana Blvd City Honolulu State HI Zip Code 96814- Purpose of Disbursement Meeting - Meals Candidate Name	Transaction ID: 81004.E4697 Date of Disbursement 09 / 29 / 2008
	Amount of Each Disbursement this Period 49.93 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: MEETING - MEALS
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) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	199.77
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

A.	Full Name (Last, First, Middle Initial) William M. Kaneko <hr/> Mailing Address 1040 19th Ave <hr/> City Honolulu State HI Zip Code 96816- <hr/> Purpose of Disbursement Consulting - Fundraising Candidate Name <hr/> 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) ▼	Transaction ID: 81003.E4622 Date of Disbursement 09 / 22 / 2008 <hr/> Amount of Each Disbursement this Period 3135.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CONSULTING - FUNDRAISING
B.	Full Name (Last, First, Middle Initial) Storquest - Kakaako <hr/> Mailing Address 850 Kawaiahao Street, #4th Floor <hr/> City Honolulu State HI Zip Code 96813- <hr/> Purpose of Disbursement Storage Fee Candidate Name <hr/> 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) ▼	Transaction ID: 80904.E4602 Date of Disbursement 09 / 02 / 2008 <hr/> Amount of Each Disbursement this Period 123.20 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 STORAGE FEE
C.	Full Name (Last, First, Middle Initial) Herbert Chun dba LVHawaii <hr/> Mailing Address 1717 Mott-Smith Drive, #1506 <hr/> City Honolulu State HI Zip Code 96822- <hr/> Purpose of Disbursement Computer Consulting Candidate Name <hr/> 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) ▼	Transaction ID: 81003.E4621 Date of Disbursement 09 / 22 / 2008 <hr/> Amount of Each Disbursement this Period 522.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 COMPUTER CONSULTING

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3780.70
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

A.

Full Name (Last, First, Middle Initial)  
Hawaiian Telcom

Mailing Address P. O. Box 30770

City Honolulu State HI Zip Code 96820-

Purpose of Disbursement

Telephone Service

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 81003.E4630

Date of Disbursement

09 / 22 / 2008

Amount of Each Disbursement this Period

305.40

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

TELEPHONE SERVICE

B.

Full Name (Last, First, Middle Initial)  
Joe Philipson

Mailing Address 3810 Leahi St #210

City Honolulu State HI Zip Code 96815-

Purpose of Disbursement

Website Consulting

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 81003.E4638

Date of Disbursement

09 / 29 / 2008

Amount of Each Disbursement this Period

1526.98

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

WEBSITE CONSULTING

C.

Full Name (Last, First, Middle Initial)  
National Democratic Club

Mailing Address 30 Ivy Street, S.E.

City Washington State DC Zip Code 20003-

Purpose of Disbursement

Catering Service

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 81003.E4641

Date of Disbursement

09 / 30 / 2008

Amount of Each Disbursement this Period

5992.33

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

CATERING SERVICE

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

7824.71

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

A.	Full Name (Last, First, Middle Initial) Gigi Hoopii	Transaction ID: 81003.E4637 Date of Disbursement 09 / 29 / 2008
	Mailing Address 1562 Dunterry Place	Amount of Each Disbursement this Period 800.00
	City Mc Lean State VA Zip Code 22101-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Entertainment for Fundraiser Candidate Name	Category/Type
	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) ▼
		ENTERTAINMENT FOR FUNDRAISER

B.	Full Name (Last, First, Middle Initial) McNeil Wilson Communications, Inc.	Transaction ID: 81003.E4634 Date of Disbursement 09 / 22 / 2008
	Mailing Address Pauahi Tower, Ste 950 1003 Bishop Street	Amount of Each Disbursement this Period 3141.36
	City Honolulu State HI Zip Code 96813-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Consulting - Media Service Candidate Name	Category/Type
	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) ▼
		CONSULTING - MEDIA SERVICE

C.	Full Name (Last, First, Middle Initial) Arrow Mailing Service	Transaction ID: 81003.E4626 Date of Disbursement 09 / 22 / 2008
	Mailing Address P.O. Box 30406	Amount of Each Disbursement this Period 722.33
	City Honolulu State HI Zip Code 96820-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Mailing Service Candidate Name	Category/Type
	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) ▼
		MAILING SERVICE

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>4663.69</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

A.

Full Name (Last, First, Middle Initial)  
Fiorello Consulting

Transaction ID: 80904.E4600  
Date of Disbursement

Mailing Address 3914 Barcroft Mews Court

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	0	8

City Falls Church State VA Zip Code 22041-

Amount of Each Disbursement this Period

3500.00
---------

Purpose of Disbursement  
Consulting - Fundraising

--

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

CONSULTING - FUNDRAISING

State: District:

B.

Full Name (Last, First, Middle Initial)  
Herbert Chun dba LVHawaii

Transaction ID: 81003.E4620  
Date of Disbursement

Mailing Address 1717 Mott-Smith Drive, #1506

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	2		2	0	0	8

City Honolulu State HI Zip Code 96822-

Amount of Each Disbursement this Period

1187.57
---------

Purpose of Disbursement  
Computer Equipment

--

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

COMPUTER EQUIPMENT

State: District:

C.

Full Name (Last, First, Middle Initial)  
McNeil Wilson Communications, Inc.

Transaction ID: 80912.E4614  
Date of Disbursement

Mailing Address Pauahi Tower, Ste 950  
1003 Bishop Street

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	1		2	0	0	8

City Honolulu State HI Zip Code 96813-

Amount of Each Disbursement this Period

494.87
--------

Purpose of Disbursement  
Art Direction

--

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

ART DIRECTION

State: District:

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

5182.44
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TOTAL This Period (last page this line number only) ..... ▶

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# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) McNeil Wilson Communications, Inc.</p> <p>Mailing Address Pauahi Tower, Ste 950 1003 Bishop Street</p> <p>City Honolulu State HI Zip Code 96813-</p> <p>Purpose of Disbursement Broadcast Production</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81003.E4633 <b>Date of Disbursement</b> 09 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 647.34</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>BROADCAST PRODUCTION</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Hilton Hawaiian Village</p> <p>Mailing Address 2005 Kalia Road</p> <p>City Honolulu State HI Zip Code 96815-1999</p> <p>Purpose of Disbursement Catering Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81003.E4632 <b>Date of Disbursement</b> 09 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 4266.54</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>CATERING SERVICE</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Perkins Coie LLP</p> <p>Mailing Address 1201 Third Ave, 40th Floor</p> <p>City Seattle State WA Zip Code 98101-</p> <p>Purpose of Disbursement Legal Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80904.E4603 <b>Date of Disbursement</b> 09 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 1726.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>LEGAL SERVICES</b></p>

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

**6639.88**

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

A.	Full Name (Last, First, Middle Initial) Endo & Company	Transaction ID: 80910.E4612 Date of Disbursement 09 / 09 / 2008
	Mailing Address 1357 Kapiolani Blvd, #1005	Amount of Each Disbursement this Period 7748.69
	City Honolulu State HI Zip Code 96814-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Accounting Services Candidate Name	Category/Type
	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) ▼
		ACCOUNTING SERVICES

B.	Full Name (Last, First, Middle Initial) Ward Plaza - Warehouse LLC	Transaction ID: 80904.E4601 Date of Disbursement 09 / 02 / 2008
	Mailing Address P.O. Box 31000	Amount of Each Disbursement this Period 2854.05
	City Honolulu State HI Zip Code 96849-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Rent Candidate Name	Category/Type
	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) ▼
		RENT

C.	Full Name (Last, First, Middle Initial) Radio KZOO	Transaction ID: 81003.E4631 Date of Disbursement 09 / 22 / 2008
	Mailing Address P.O. Box 61335	Amount of Each Disbursement this Period 523.56
	City Honolulu State HI Zip Code 96839-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Advertising Candidate Name	Category/Type
	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) ▼
		ADVERTISING

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	11126.30
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

A.	Full Name (Last, First, Middle Initial) BankCard Center	Transaction ID: 81003.E4639 Date of Disbursement 09 / 29 / 2008
	Mailing Address P.O. Box 29450	Amount of Each Disbursement this Period 732.29
	City Honolulu State HI Zip Code 96820-1850	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Credit Card Payment [See Below]	CREDIT CARD PAYMENT [SEE BELOW]
	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) ▼	

B.	Full Name (Last, First, Middle Initial) Armand Chicago Pizza	Transaction ID: 81004.E4695 Date of Disbursement 09 / 29 / 2008
	Mailing Address 226 Massachussetts Ave	Amount of Each Disbursement this Period 127.48
	City Washington State DC Zip Code 20002-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Meeting - Meals	[MEMO ITEM] MEMO: MEETING - MEALS
	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) ▼	

C.	Full Name (Last, First, Middle Initial) Belga Cafe	Transaction ID: 81004.E4693 Date of Disbursement 09 / 29 / 2008
	Mailing Address 514 8th Street	Amount of Each Disbursement this Period 160.84
	City Washington State DC Zip Code 20003-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Meeting - Meals	[MEMO ITEM] MEMO: MEETING - MEALS
	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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	732.29
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Bobby Vans Steakhouse Mailing Address 809 15th Street NW City Washington State DC Zip Code 20005- Purpose of Disbursement Meeting - Meals 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) ▼	Transaction ID: 81004.E4694 Date of Disbursement 09 / 29 / 2008
	Amount of Each Disbursement this Period 143.97 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: MEETING - MEALS

<b>B.</b> Full Name (Last, First, Middle Initial) United Airlines Corporation Mailing Address 2 N. LaSalle Street City Chicago State IL Zip Code 60602- Purpose of Disbursement Airline Fee 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) ▼	Transaction ID: 81004.E4692 Date of Disbursement 09 / 29 / 2008
	Amount of Each Disbursement this Period 300.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: AIRLINE FEE

<b>C.</b> Full Name (Last, First, Middle Initial) Aristotle International, Inc. Mailing Address 205 Pennsylvania Ave, SE City Washington State DC Zip Code 20003- Purpose of Disbursement Merchant Fee 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) ▼	Transaction ID: 81006.E4699 Date of Disbursement 09 / 18 / 2008
	Amount of Each Disbursement this Period 71.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 MERCHANT FEE

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	71.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

A.	Full Name (Last, First, Middle Initial) Koi Catering & Take Out	Transaction ID: 81003.E4618 Date of Disbursement 09 / 19 / 2008
	Mailing Address 2028 Dillingham Blvd	Amount of Each Disbursement this Period 905.00
	City Honolulu State HI Zip Code 96819-4009	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Catering Service	Category/Type
	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) ▼
		CATERING SERVICE

B.	Full Name (Last, First, Middle Initial) Ian Kitajima	Transaction ID: 80912.E4613 Date of Disbursement 09 / 11 / 2008
	Mailing Address 94-209 Makawai Place	Amount of Each Disbursement this Period 1688.60
	City Waipahu State HI Zip Code 96797-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement [See Below]	Category/Type
	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) ▼
		REIMBURSEMENT [SEE BELOW]

C.	Full Name (Last, First, Middle Initial) Cardscan	Transaction ID: 81004.E4681 Date of Disbursement 09 / 11 / 2008
	Mailing Address 25 First Street, Ste 107	Amount of Each Disbursement this Period 1376.94
	City Cambridge State MA Zip Code 02141-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Equipment and Software	Category/Type
	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) ▼
		<b>[MEMO ITEM]</b> MEMO: EQUIPMENT AND SOFTWARE

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2593.60
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 40 / 42

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

A.

Full Name (Last, First, Middle Initial)  
Kakaako Kitchen

Mailing Address 1200 Ala Moana Blvd #135

City Honolulu State HI Zip Code 96814-

Purpose of Disbursement  
Meeting - Meals

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81004.E4683

Date of Disbursement

09 / 11 / 2008

Amount of Each Disbursement this Period

188.22

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEETING - MEALS

B.

Full Name (Last, First, Middle Initial)  
Irene Isa Takizawa

Mailing Address 1239 Olomea Street

City Honolulu State HI Zip Code 96817-

Purpose of Disbursement  
Administrative Services

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81003.E4623

Date of Disbursement

09 / 22 / 2008

Amount of Each Disbursement this Period

522.50

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

ADMINISTRATIVE SERVICES

C.

Full Name (Last, First, Middle Initial)  
Bank of Hawaii

Mailing Address 1441 Kapiolani Blvd.

City Honolulu State HI Zip Code 96814-

Purpose of Disbursement  
Bank Charge

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81006.E4700

Date of Disbursement

09 / 30 / 2008

Amount of Each Disbursement this Period

11.50

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

BANK CHARGE

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

534.00

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

44855.91

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 41 / 42

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Comm. Mailing Address 430 South Capitol Street, S.E. City Washington State DC Zip Code 20003- Purpose of Disbursement 2008 CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 81003.E4635 Date of Disbursement 09 / 25 / 2008
	Amount of Each Disbursement this Period 50000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) Iron Workers Scholarship Golf Tournament Mailing Address c/o 94-497 Ukee St City Waipahu State HI Zip Code 96797- Purpose of Disbursement DONATION-SCHOLARSHIP Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 80916.E4617 Date of Disbursement 09 / 15 / 2008
	Amount of Each Disbursement this Period 1300.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ►

51300.00

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

51300.00

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 42 / 42
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Abercrombie for Congress

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Herbert Chun dba LVHawaii	Nature of Debt (Purpose): Computer Consulting
Mailing Address 1717 Mott-Smith Drive, #1506	
City Honolulu State HI ZIP Code 96822-	

Outstanding Balance Beginning This Period	<b>Transaction ID: LS81013.E4707</b>	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
522.50	0.00	522.50

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Lezley P. Faleafine	Nature of Debt (Purpose): Consulting - Website Maintenance
Mailing Address 98-1030 Moanalua Rd, #302	
City Aiea State HI ZIP Code 96701-	

Outstanding Balance Beginning This Period	<b>Transaction ID: LS81013.E4710</b>	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
1500.00	0.00	1500.00

1) <b>SUBTOTALS</b> This Period This Page (optional).....	2022.50
2) <b>TOTALS</b> This Period (last page this line number only).....	2022.50
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)	2022.50