

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines.

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

CITY ▲ STATE ▲ ZIP CODE ▲

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

#### 4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

- Primary (12P)  General (12G)  Runoff (12R)
- Convention (12C)  Special (12S)

Election on  /  /  in the State of

(c) 30-Day **POST**-Election Report for the:

- General (30G)  Runoff (30R)  Special (30S)

Election on  /  /  in the State of

5. Covering Period   /  2018 through   /  2018

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

Type or Print Name of Treasurer Yamamoto, George, , ,

Signature of Treasurer Yamamoto, George, , , *[Electronically Filed]* Date   /  2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office Use Only									
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**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**Hanabusa for Hawaii**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	0.00	137168.47
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	12500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	0.00	124668.47
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	4198.94	203624.18
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	500.01
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	4198.94	203124.17
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	15537.16	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	

**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

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Hanabusa for Hawaii

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

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).....	0.00	7005.59
(ii) Unitemized.....	0.00	10462.88
(iii) TOTAL of contributions from individuals ▶	0.00	17468.47
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	119700.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	137168.47
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	500.01
15. OTHER RECEIPTS (Dividends, Interest, etc.) .....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	0.00	137668.48

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 16

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	4198.94	203624.18
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	200000.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	200000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	12500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	12500.00
21. OTHER DISBURSEMENTS .....	30000.00	255250.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	34198.94	671374.18

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	49736.10
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	0.00
25. SUBTOTAL (add Line 23 and Line 24).....	49736.10
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	34198.94
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	15537.16

**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 5 OF 16	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**Hanabusa for Hawaii**

Full Name (Last, First, Middle Initial) <b>A. Accurate Word LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2018
Mailing Address 4481 White Plains Ln		FEC Identification Number C
City White Plains	State MD	Zip Code 20695-3018
Purpose of Disbursement Printing - Stationery and Envelopes		Amount of Each Disbursement this Period 559.00
Candidate Name		Transaction ID : VN7QJ9Y2YT9
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Authorize.Net</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 04 / 2018
Mailing Address PO Box 8999		FEC Identification Number C
City San Francisco	State CA	Zip Code 94128-8999
Purpose of Disbursement Merchant Gateway Fee		Amount of Each Disbursement this Period 30.00
Candidate Name		Transaction ID : VN7QJ9Y2YJ6
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>C. Authorize.Net</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2018
Mailing Address PO Box 8999		FEC Identification Number C
City San Francisco	State CA	Zip Code 94128-8999
Purpose of Disbursement Merchant Gateway Fee		Amount of Each Disbursement this Period 30.00
Candidate Name		Transaction ID : VN7QJ9Y2YK4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type 001	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	619.00
<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)		PAGE 6 OF 16	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Hanabusa for Hawaii**

Full Name (Last, First, Middle Initial) <b>A. Authorize.Net</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2018
Mailing Address PO Box 8999		FEC Identification Number C
City San Francisco	State CA	Zip Code 94128-8999
Purpose of Disbursement Merchant Gateway Fee		Category/ Type 001
Candidate Name		Amount of Each Disbursement this Period 30.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VN7QJ9Y2YM2
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. NGP VAN, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2018
Mailing Address 1101 15Th St NW Ste 500		FEC Identification Number C
City Washington	State DC	Zip Code 20005-5006
Purpose of Disbursement Filing Software/Database		Category/ Type
Candidate Name		Amount of Each Disbursement this Period 2700.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VN7QJ9Y2YN0
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>c. Ross, Brittany, E, ,</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2018
Mailing Address 206 12Th St		FEC Identification Number C
City Honolulu	State HI	Zip Code 96818-4717
Purpose of Disbursement Condolence Flower Reimbursement (memos below if itemized)		Category/ Type
Candidate Name		Amount of Each Disbursement this Period 272.39
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : VN7QJ9Y2YV7
State: District:		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3002.39
<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 7 OF 16			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Hanabusa for Hawaii**

Full Name (Last, First, Middle Initial) <b>A. Teleflora</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2018
Mailing Address 11444 W Olympic Blvd FI 4		FEC Identification Number C
City Los Angeles	State CA	Zip Code 90064-1546
Purpose of Disbursement Condolence Flowers		Amount of Each Disbursement this Period 272.39
Candidate Name		Transaction ID : VN7QJ9Y2YW5
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ross, Brittany, E, ,</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2018
Mailing Address 206 12Th St		FEC Identification Number C
City Honolulu	State HI	Zip Code 96818-4717
Purpose of Disbursement Expense Reimbursement (memos below if itemized)		Amount of Each Disbursement this Period 417.70
Candidate Name		Transaction ID : VN7QJ9Y2YX3
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2018
Mailing Address 335 Merchant St FI GROUND		FEC Identification Number C
City Honolulu	State HI	Zip Code 96813-9998
Purpose of Disbursement PO Box Rental		Amount of Each Disbursement this Period 122.00
Candidate Name		Transaction ID : VN7QJ9Y2YZ9
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	417.70
<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)	PAGE 8 OF 16			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Hanabusa for Hawaii**

Full Name (Last, First, Middle Initial) <b>A. Suntrust</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2018
Mailing Address PO Box 6600		FEC Identification Number C
City Hagerstown	State MD	Zip Code 21741-6600
Purpose of Disbursement Merchant Gateway Fee	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 19.95
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : VN7QJ9Y2YQ5 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Suntrust</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2018
Mailing Address PO Box 6600		FEC Identification Number C
City Hagerstown	State MD	Zip Code 21741-6600
Purpose of Disbursement Merchant Gateway Fee	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 19.95
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : VN7QJ9Y2YR3 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Suntrust</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2018
Mailing Address PO Box 6600		FEC Identification Number C
City Hagerstown	State MD	Zip Code 21741-6600
Purpose of Disbursement Merchant Gateway Fee	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 19.95
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : VN7QJ9Y2YS1 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	59.85
<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 9 OF 16
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Hanabusa for Hawaii**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. USPS</b>		M M / D D / Y Y Y Y 07 / 18 / 2018
Mailing Address 335 Merchant St FI GROUND		FEC Identification Number
City Honolulu	State HI	Zip Code 96813-9998
Purpose of Disbursement Postage		<input type="checkbox"/> C
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018	100.00
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		Transaction ID : VN7QJ9Y2YP8
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B.</b>		M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number
City	State	Zip Code
Purpose of Disbursement		<input type="checkbox"/> C
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C.</b>		M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number
City	State	Zip Code
Purpose of Disbursement		<input type="checkbox"/> C
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	4198.94

**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 10 OF 16	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Hanabusa for Hawaii**

Full Name (Last, First, Middle Initial)  
**A. AMERIPAC: THE FUND FOR A GREATER AMERICA**

Mailing Address 700 13Th St NW Ste 600

City Washington State DC Zip Code 20005-5998

Purpose of Disbursement Candidate Contributions earmarked through Ameripac (itemized memos below)  011 Category/Type

Candidate Name **AMERIPAC: THE FUND FOR A GREATER AMERICA**

Office Sought:  House  Senate  President Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement M M / D D / Y Y Y Y  
07 / 18 / 2018

FEC Identification Number **C** C00271338

Amount of Each Disbursement this Period 30000.00

Transaction ID : VN7QJ9Y2Z07

Memo Item

Full Name (Last, First, Middle Initial)  
**B. AFTAB FOR OHIO**

Mailing Address PO Box 713

City Cincinnati State OH Zip Code 45201-0713

Purpose of Disbursement Contribution  011 Category/Type

Candidate Name **PUREVAL, AFTAB, , ,**

Office Sought:  House  Senate  President Disbursement For: 2018  Primary  General  Other (specify) ▼

State: OH District: 01

Date of Disbursement M M / D D / Y Y Y Y  
07 / 18 / 2018

FEC Identification Number **C** C00667519

Amount of Each Disbursement this Period 1500.00

Transaction ID : VN7QJ9Y2Z14

Memo Item \*

Full Name (Last, First, Middle Initial)  
**C. ANGIE CRAIG FOR CONGRESS**

Mailing Address PO Box 22116

City Eagan State MN Zip Code 55122-0116

Purpose of Disbursement Contribution  011 Category/Type

Candidate Name **CRAIG, ANGELA DAWN, , ,**

Office Sought:  House  Senate  President Disbursement For: 2018  Primary  General  Other (specify) ▼

State: MN District: 02

Date of Disbursement M M / D D / Y Y Y Y  
07 / 18 / 2018

FEC Identification Number **C** C00575209

Amount of Each Disbursement this Period 1500.00

Transaction ID : VN7QJ9Y2Z22

Memo Item \*

**SUBTOTAL** of Disbursements This Page (optional).....▶ 30000.00

**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)		PAGE 11 OF 16	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Hanabusa for Hawaii**

Full Name (Last, First, Middle Initial) <b>A. COLIN ALLRED FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2018
Mailing Address PO Box 601631		FEC Identification Number C 00637868
City Dallas	State TX	Zip Code 75360-1631
Purpose of Disbursement Contribution	<input type="checkbox"/> 010	Amount of Each Disbursement this Period 1500.00
Candidate Name <b>ALLRED, COLIN, , ,</b>	Category/ Type	Transaction ID : VN7QJ9Y2Z30
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: TX District: 32		

Full Name (Last, First, Middle Initial) <b>B. COMMITTEE TO ELECT RICHARD OJEDA</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2018
Mailing Address PO Box 624 PO BOX 624		FEC Identification Number C 00639989
City Holden	State WV	Zip Code 25625-0624
Purpose of Disbursement Contribution	<input type="checkbox"/> 010	Amount of Each Disbursement this Period 1500.00
Candidate Name <b>OJEDA, RICHARD NEECE SENAT, , ,</b>	Category/ Type	Transaction ID : VN7QJ9Y2Z48
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: WV District: 03		

Full Name (Last, First, Middle Initial) <b>C. DEBBIE FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2018
Mailing Address PO Box 566442		FEC Identification Number C 00652065
City Miami	State FL	Zip Code 33256-6442
Purpose of Disbursement Contribution	<input type="checkbox"/> 010	Amount of Each Disbursement this Period 1500.00
Candidate Name <b>MUCARSEL-POWELL, DEBBIE, , ,</b>	Category/ Type	Transaction ID : VN7QJ9Y2Z56
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: FL District: 26		

<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)		PAGE 12 OF 16	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Hanabusa for Hawaii**

Full Name (Last, First, Middle Initial) <b>A. ELAINE FOR CONGRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2018	
Mailing Address PO Box 66191			FEC Identification Number C 00664375	
City Virginia Beach	State VA	Zip Code 23466-6191	Amount of Each Disbursement this Period 1500.00	
Purpose of Disbursement Contribution		Category/ Type 011	Transaction ID : VN7QJ9Y2Z64	
Candidate Name <b>LURIA, ELAINE, , ,</b>		Disbursement For: 2018		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: VA District: 02	<input checked="" type="checkbox"/> Memo Item *			

Full Name (Last, First, Middle Initial) <b>B. ELISSA SLOTKIN FOR CONGRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2018	
Mailing Address PO Box 244			FEC Identification Number C 00650150	
City Holly	State MI	Zip Code 48442-0244	Amount of Each Disbursement this Period 1500.00	
Purpose of Disbursement Contribution		Category/ Type 011	Transaction ID : VN7QJ9Y2Z72	
Candidate Name <b>SLOTKIN, ELISSA, , ,</b>		Disbursement For: 2018		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: MI District: 08	<input checked="" type="checkbox"/> Memo Item *			

Full Name (Last, First, Middle Initial) <b>C. ELIZABETH PANNILL FLETCHER FOR CONGRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2018	
Mailing Address 3262 Westheimer Rd # 636			FEC Identification Number C 00640045	
City Houston	State TX	Zip Code 77098-1002	Amount of Each Disbursement this Period 1500.00	
Purpose of Disbursement Contribution		Category/ Type 011	Transaction ID : VN7QJ9Y2Z80	
Candidate Name <b>FLETCHER, ELIZABETH, , ,</b>		Disbursement For: 2018		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: TX District: 07	<input checked="" type="checkbox"/> Memo Item *			

<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)		PAGE 13 OF 16	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Hanabusa for Hawaii**

**A. FRIENDS OF BEN MCADAMS**

Full Name (Last, First, Middle Initial)  
Mailing Address 2205 S 1000 E

City Slc State UT Zip Code 84106-2314

Purpose of Disbursement Contribution  011

Candidate Name **MCADAMS, BEN, , ,** Category/Type

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

State: UT District: 04

Date of Disbursement: 07 / 18 / 2018

FEC Identification Number: **C** C00658633

Amount of Each Disbursement this Period: 1500.00

Transaction ID : VN7QJ9Y2Z98

Memo Item \*

**B. HARLEY ROUDA FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address 120 Newport Center Dr # 28

City Newport Beach State CA Zip Code 92660-6916

Purpose of Disbursement Contribution  011

Candidate Name **ROUDA, HARLEY E JR, , ,** Category/Type

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

State: CA District: 48

Date of Disbursement: 07 / 18 / 2018

FEC Identification Number: **C** C00633982

Amount of Each Disbursement this Period: 1500.00

Transaction ID : VN7QJ9Y2ZA6

Memo Item \*

**C. JASON CROW FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 32145

City Aurora State CO Zip Code 80041-2145

Purpose of Disbursement Contribution  011

Candidate Name **CROW, JASON, , ,** Category/Type

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

State: CO District: 06

Date of Disbursement: 07 / 18 / 2018

FEC Identification Number: **C** C00637363

Amount of Each Disbursement this Period: 1500.00

Transaction ID : VN7QJ9Y2ZB3

Memo Item \*

**SUBTOTAL** of Disbursements This Page (optional).....▶ 0.00

**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)		PAGE 14 OF 16	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Hanabusa for Hawaii**

Full Name (Last, First, Middle Initial) <b>A. KATIE HILL FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2018
Mailing Address 6681 Sweetclover Ln		FEC Identification Number C 00634212
City Carlsbad	State CA	Zip Code 92011-4082
Purpose of Disbursement Contribution	<input type="checkbox"/> 010	Amount of Each Disbursement this Period 1500.00
Candidate Name <b>HILL, KATHERINE LAUREN, , ,</b>	Category/ Type	Transaction ID : VN7QJ9Y2ZC1
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: CA District: 25		

Full Name (Last, First, Middle Initial) <b>B. KATIE PORTER FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2018
Mailing Address 777 S Figueroa St Ste 4050		FEC Identification Number C 00636571
City Los Angeles	State CA	Zip Code 90017-5864
Purpose of Disbursement Contribution	<input type="checkbox"/> 010	Amount of Each Disbursement this Period 1500.00
Candidate Name <b>PORTER, KATHERINE, , ,</b>	Category/ Type	Transaction ID : VN7QJ9Y2ZD9
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: CA District: 45		

Full Name (Last, First, Middle Initial) <b>C. MIKIE SHERRILL FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2018
Mailing Address PO Box 43032		FEC Identification Number C 00640003
City Montclair	State NJ	Zip Code 07043-0032
Purpose of Disbursement Contribution	<input type="checkbox"/> 010	Amount of Each Disbursement this Period 1500.00
Candidate Name <b>SHERRILL, REBECCA MICHELLE, , ,</b>	Category/ Type	Transaction ID : VN7QJ9Y2ZE7
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: NJ District: 11		

<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)	PAGE 15 OF 16
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Hanabusa for Hawaii**

Full Name (Last, First, Middle Initial) <b>A. SPANBERGER FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2018
Mailing Address PO Box 3121		FEC Identification Number C 00649913
City Glen Allen	State VA	Zip Code 23058-3121
Purpose of Disbursement Contribution	011 Category/ Type	
Candidate Name <b>SPANBERGER, ABIGAIL, , ,</b>	Amount of Each Disbursement this Period 1500.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: VA District: 07	Transaction ID : VN7QJ9Y2ZF5 <input checked="" type="checkbox"/> Memo Item *	

Full Name (Last, First, Middle Initial) <b>B. SUSAN WILD FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2018
Mailing Address 1636 N Cedar Crest Blvd # 183		FEC Identification Number C 00658567
City Allentown	State PA	Zip Code 18104-2318
Purpose of Disbursement Contribution	011 Category/ Type	
Candidate Name <b>WILD, SUSAN, , ,</b>	Amount of Each Disbursement this Period 1500.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA District: 15	Transaction ID : VN7QJ9Y2ZG3 <input checked="" type="checkbox"/> Memo Item *	

Full Name (Last, First, Middle Initial) <b>C. SUSIE LEE FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2018
Mailing Address 5130 S Fort Apache Rd Ste 215-382		FEC Identification Number C 00655613
City Las Vegas	State NV	Zip Code 89148-1719
Purpose of Disbursement Contribution	011 Category/ Type	
Candidate Name <b>LEE, SUSIE, , ,</b>	Amount of Each Disbursement this Period 1500.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NV District: 03	Transaction ID : VN7QJ9Y2ZH1 <input checked="" type="checkbox"/> Memo Item *	

<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)		PAGE 16 OF 16	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Hanabusa for Hawaii**

Full Name (Last, First, Middle Initial) <b>A. TOM MALINOWSKI FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2018
Mailing Address PO Box 58		FEC Identification Number C 00656686
City Martinsville	State NJ	Zip Code 08836-0058
Purpose of Disbursement Contribution	011	
Candidate Name <b>MALINOWSKI, TOM, , ,</b>		Amount of Each Disbursement this Period 1500.00
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2018	
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼	
State: NJ	District: 07	
		Transaction ID : VN7QJ9Y2ZJ9
		<input checked="" type="checkbox"/> Memo Item *

Full Name (Last, First, Middle Initial) <b>B. WEXTON FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2018
Mailing Address PO Box 650550		FEC Identification Number C 00638023
City Sterling	State VA	Zip Code 20165-0550
Purpose of Disbursement Contribution	011	
Candidate Name <b>WEXTON, JENNIFER, , ,</b>		Amount of Each Disbursement this Period 1500.00
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2018	
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼	
State: VA	District: 10	
		Transaction ID : VN7QJ9Y2ZK7
		<input checked="" type="checkbox"/> Memo Item *

Full Name (Last, First, Middle Initial) <b>C. XOCHITL FOR NEW MEXICO</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2018
Mailing Address PO Box 2250		FEC Identification Number C 00666149
City Las Cruces	State NM	Zip Code 88004-2250
Purpose of Disbursement Contribution	011	
Candidate Name <b>TORRES SMALL, XOCHITL, , ,</b>		Amount of Each Disbursement this Period 1500.00
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2018	
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼	
State: NM	District: 02	
		Transaction ID : VN7QJ9Y2ZM5
		<input checked="" type="checkbox"/> Memo Item *

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	30000.00