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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5

PRINCESS CRUISES AND TOURS, INC. AND ALASKA HOTEL PROPERTIES, LLC PAC ("PRINCESS CRUISES AND TOURS, INC. PAC")

ADDRESS (number and street) 24305 TOWN CENTER DRIVE

Check if different than previously reported. (ACC)

SANTA CLARITA CA 91355-4999

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C 00365031

3. IS THIS REPORT X NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) X October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) (b) Monthly Report Due On: Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only) Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Conventon (12C) Special (12S)

Election on M M / D D / Y Y Y Y in the State of

(d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)

Election on M M / D D / Y Y Y Y in the State of

5. Covering Period 07 01 2010 through 09 30 2010

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

ASSISTANT Type or Print Name of Treasurer VERONICA L. MORALES

ASSISTANT Signature of Treasurer Veronica L. Morales Date 10 06 2010

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

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FEC FORM 3X Rev. 12/2004

10030434564

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

PRINCESS CRUISES AND TOURS, INC. AND ALASKA HOTEL PROPERTIES, LLC PAC

Report Covering the Period: From: ^{M M / D D / Y Y Y Y} 07 01 2010 To: ^{M M / D D / Y Y Y Y} 09 30 2010

10030434565

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand ^{v v v v} January 1, 2010		, 3,894.48
(b) Cash on Hand at Beginning of Reporting Period.....	, 6,206.98	
(c) Total Receipts (from Line 19)	, 3,338.50	, 24,651.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	, 9,545.48	, 28,545.48
7. Total Disbursements (from Line 31)	, 7,000.00	, 26,000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	, 2,545.48	, 2,545.48
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	, -	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	, -	

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

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 Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	,	,
(ii) Non-Federal Share.....	,	,
(b) Other Federal Operating Expenditures	,	,
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	,	,
22. Transfers to Affiliated/Other Party Committees.....	,	,
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	, 7,000.00	, 26,000.00
24. Independent Expenditures (use Schedule E)	,	,
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	,	,
26. Loan Repayments Made.....	,	,
27. Loans Made.....	,	,
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	,	,
(b) Political Party Committees	,	,
(c) Other Political Committees (such as PACs).....	,	,
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	,	,
29. Other Disbursements	,	,
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	,	,
(ii) "Levin" Share.....	,	,
(b) Federal Election Activity Paid Entirely With Federal Funds	,	,
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	,	,
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	, 7,000.00	, 26,000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	, 7,000.00	, 26,000.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	3,338.50	24,651.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3,338.50	24,651.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

10030434568

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

FROM INDIVIDUALS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 11	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17	

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)
PRINCESS CRUISES AND TOURS, INC. AND ALASKA HOTEL PROPERTIES, LLC PAC

Full Name (Last, First, Middle Initial) A. SHULLEN, LEIDMILA		Date of Receipt M M / D D / Y Y Y Y 07 07 2010
Mailing Address 24305 TOWN CENTER DRIVE		Amount of Each Receipt this Period 240.00
City SANTA CLARITA, CA	State Zip Code 91355	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 240.00
Name of Employer PRINCESS CRUISES	Occupation DIRECTOR - CUSTOMER SVC SYSTEMS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. BARRETT, PAUL		Date of Receipt M M / D D / Y Y Y Y PAYROLL DEDUCTIONS
Mailing Address 24305 TOWN CENTER DRIVE		Amount of Each Receipt this Period 450.00
City SANTA CLARITA, CA	State Zip Code 91355	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 450.00 BI-WEEKLY @ \$150/EACH
Name of Employer PRINCESS CRUISES	Occupation VICE PRESIDENT - TECHNICAL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. FINDON, ERIC		Date of Receipt M M / D D / Y Y Y Y PAYROLL DEDUCTIONS
Mailing Address 24305 TOWN CENTER DRIVE		Amount of Each Receipt this Period 400.00
City SANTA CLARITA, CA	State Zip Code 91355	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00 BI-WEEKLY @ \$200.00/EA
Name of Employer PRINCESS CRUISES	Occupation VICE PRESIDENT - CUSTOMER SVC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional).....▶	1,090.00
TOTAL This Period (last page this line number only).....▶	

10030434569

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

FROM INDIVIDUALS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 11	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)
PRINCESS CRUISES AND TOURS, INC. AND ALASKA HOTEL PROPERTIES, LLC PAC

A. Full Name (Last, First, Middle Initial) GILLESPIE, KENNETH		Date of Receipt PAYROLL DEDUCTIONS M M / D D / Y Y Y Y	
Mailing Address 24305 TOWN CENTER DRIVE			
City SANTA CLARITA, CA	State CA	Zip Code 91355	Amount of Each Receipt this Period , , 300.00
FEC ID number of contributing federal political committee. C		BI-WEEKLY @ \$150.00/EA	
Name of Employer PRINCESS CRUISES	Occupation VICE PRESIDENT - TECHNICAL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ , , 600.00		

B. Full Name (Last, First, Middle Initial) MARINO, EUGENE		Date of Receipt PAYROLL DEDUCTIONS M M / D D / Y Y Y Y	
Mailing Address 24305 TOWN CENTER DRIVE			
City SANTA CLARITA, CA	State CA	Zip Code 91355	Amount of Each Receipt this Period , , 300.00
FEC ID number of contributing federal political committee. C		BI-WEEKLY @ \$150/EA	
Name of Employer PRINCESS CRUISES	Occupation VICE PRESIDENT - PURCHASING		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ , , 600.00		

C. Full Name (Last, First, Middle Initial) MEYENBERG, WILLIAM		Date of Receipt PAYROLL DEDUCTIONS M M / D D / Y Y Y Y	
Mailing Address 24305 TOWN CENTER DRIVE			
City SANTA CLARITA, CA	State CA	Zip Code 91355	Amount of Each Receipt this Period , , 150.00
FEC ID number of contributing federal political committee. C		BI-WEEKLY @ \$75/EA	
Name of Employer PRINCESS CRUISES	Occupation DIRECTOR - YIELD MGMT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ , , 300.00		

SUBTOTAL of Receipts This Page (optional).....▶	, , 750.00
TOTAL This Period (last page this line number only).....▶	, , .

10030434570

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS
 FROM INDIVIDUALS

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

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NAME OF COMMITTEE (In Full)
 PRINCESS CRUISES AND TOURS, INC. AND ALASKA HOTEL PROPERTIES, LLC PAC

Full Name (Last, First, Middle Initial) A. PRIMO, CLECIO		Date of Receipt PAYROLL DEDUCTIONS M M / D D / Y Y Y Y
Mailing Address 24305 TOWN CENTER DRIVE		Amount of Each Receipt this Period 300.00
City SANTA CLARITA, CA	State Zip Code 91355	
FEC ID number of contributing federal political committee. C		BI-WEEKLY @ \$150/EA
Name of Employer PRINCESS CRUISES	Occupation VICE PRESIDENT - AIR SVCS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. BUSTAMANTE, BRUCE		Date of Receipt PAYROLL DEDUCTIONS M M / D D / Y Y Y Y
Mailing Address 800 FIFTH AVENUE, STUIE 2600		Amount of Each Receipt this Period 900.00
City SEATTLE, WA	State Zip Code 98104	
FEC ID number of contributing federal political committee. C		BI-WEEKLY @ 225/EA
Name of Employer PRINCESS CRUISES	Occupation VICE PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 	

SUBTOTAL of Receipts This Page (optional).....▶	, , 1,200.00
TOTAL This Period (last page this line number only).....▶	, , 3,040.00

10030434571

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

CAMPAIGN CONTRIBUTIONS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PRINCESS CRUISES AND TOURS, INC. AND ALASKA HOTEL PROPERTIES, LLC PAC

Full Name (Last, First, Middle Initial)

<p>A. LISA MURKOWSKI FOR US SENATE</p>		<p>Date of Disbursement</p> <p>M M / D D / Y Y Y Y</p> <p>07 14 2010</p>	
<p>Mailing Address</p> <p>P.O. BOX 100847</p>			
<p>City State Zip Code</p> <p>ANCHORAGE, AK 99510</p>			
<p>Purpose of Disbursement</p> <p>CAMPAIGN CONTRIBUTION</p>		<p>011</p>	
<p>Candidate Name</p> <p>LISA MURKOWSKI</p>		<p>Amount of Each Disbursement this Period</p> <p>, , 1,000.00</p>	
<p>Office Sought:</p> <p><input checked="" type="checkbox"/> House</p> <p><input type="checkbox"/> Senate</p> <p><input type="checkbox"/> President</p>	<p>Disbursement For:</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2010</p> <p><input type="checkbox"/> Other (specify) ▼</p>		
<p>State: AK</p>	<p>District:</p>		

<p>B. FLORIDA DELIVERS LEADERSHIP PAC</p>		<p>Date of Disbursement</p> <p>M M / D D / Y Y Y Y</p> <p>07 26 2010</p>	
<p>Mailing Address</p> <p>1831 BAY STREET SE</p>			
<p>City State Zip Code</p> <p>WASHINGTON, DC 20003</p>			
<p>Purpose of Disbursement</p> <p>CAMPAIGN CONTRIBUTION</p>		<p>011</p>	
<p>Candidate Name</p> <p>FLORIDA DELIVERS LEADERSHIP PAC</p>		<p>Amount of Each Disbursement this Period</p> <p>, , 2,000.00</p>	
<p>Office Sought:</p> <p><input type="checkbox"/> House</p> <p><input type="checkbox"/> Senate</p> <p><input type="checkbox"/> President</p>	<p>Disbursement For:</p> <p><input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		
<p>State:</p>	<p>District:</p> <p>CONTRIBUTION TO PAC</p>		

<p>C. FRIENDS OF CORRINE BROWN</p>		<p>Date of Disbursement</p> <p>M M / D D / Y Y Y Y</p> <p>07 26 2010</p>	
<p>Mailing Address</p> <p>3563 CARRIAGE WALK LANE</p>			
<p>City State Zip Code</p> <p>LAUREL, MC 20724</p>			
<p>Purpose of Disbursement</p> <p>CAMPAIGN CONTRIBUTION</p>		<p>011</p>	
<p>Candidate Name</p> <p>CORRINE BROWN</p>		<p>Amount of Each Disbursement this Period</p> <p>, , 2,000.00</p>	
<p>Office Sought:</p> <p><input checked="" type="checkbox"/> House</p> <p><input type="checkbox"/> Senate</p> <p><input type="checkbox"/> President</p>	<p>Disbursement For:</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010</p> <p><input type="checkbox"/> Other (specify) ▼</p>		
<p>State: FL</p>	<p>District: 3</p>		

<p>SUBTOTAL of Disbursements This Page (optional).....▶</p>	<p>, , 5,000.00</p>
<p>TOTAL This Period (last page this line number only).....▶</p>	<p>, , .</p>

10030434572

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS
 CAMPAIGN CONTRIBUTIONS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE 10 OF 11
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b	

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NAME OF COMMITTEE (In Full)
PRINCESS CRUISES AND TOURS, INC. AND ALASKA HOTEL PROPERTIES, LLC PAC

A. HANABUSA 2010			Date of Disbursement M M / D D / Y Y Y Y 09 28 2010	
Mailing Address P.O. BOX 1416				
City HONOLULU, HI 96806		State	Zip Code	
Purpose of Disbursement CAMPAIGN CONTRIBUTION		011		
Candidate Name COLLEEN HANABUSA		Category/ Type		
Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) ▼		
State: HI District: 1				
			Amount of Each Disbursement this Period , , 2,000.00	

B. DEMINT FOR SENATE COMMITTEE INC.			Date of Disbursement M M / D D / Y Y Y Y 09 28 2010	
Mailing Address P.O. BOX 12425				
City COLUMBIA, SC 29211		State	Zip Code	
Purpose of Disbursement CAMPAIGN CONTRIBUTION		011		
Candidate Name JIM DEMINT		Category/ Type		
Office Sought:	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) ▼		
State: SC District:				
			Amount of Each Disbursement this Period , , 2,000.00	

C. LOBIONDO FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 09 28 2010	
Mailing Address P.O. BOX 550				
City VINELAND, NJ 08362		State	Zip Code	
Purpose of Disbursement CAMPAIGN CONTRIBUTION		011		
Candidate Name FRANK LOBIONDO		Category/ Type		
Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) ▼		
State: NJ District: 2				
			Amount of Each Disbursement this Period , , 1,000.00	

SUBTOTAL of Disbursements This Page (optional).....▶	, , 5,000.00
TOTAL This Period (last page this line number only).....▶	, , .

10030434573

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

CAMPAIGN CONTRIBUTIONS

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

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 11

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PRINCESS CRUISES AND TOURS, INC. AND ALASKA HOTEL PROPERTIES, LLC PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF BENNIE THOMPSON

Date of Disbursement

M M / D D / Y Y Y Y
06 23 2010

Mailing Address
236 MASSACHUSETTS AVENUE NE

City State Zip Code
WASHINGTON, D.C. 20002

Purpose of Disbursement

CAMPAIGN CONTRIBUTION

011

Amount of Each Disbursement this Period

Candidate Name

BENNIE THOMPSON

Category/
Type

, (1,000.00)

Office Sought: House
 Senate
 President

Disbursement For: Primary General 2010
 Other (specify) ▼

* NEGATIVE ENTRY
CHECK VOIDED *

State: MS District: 2

Full Name (Last, First, Middle Initial)

B. DAN IO

Date of Disbursement

M M / D D / Y Y Y Y
02 22 2010

Mailing Address
1088 BISHOP STREET, SUITE 1009

City State Zip Code
HONOLULU, HI 96813

Purpose of Disbursement

CAMPAIGN CONTRIBUTION

011

Amount of Each Disbursement this Period

Candidate Name

DANIEL INOUE

Category/
Type

, (2,000.00)

Office Sought: House
 Senate
 President

Disbursement For: Primary General 2010
 Other (specify) ▼

* NEGATIVE ENTRY
CHECK VOIDED *

State: HI District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M / D D / Y Y Y Y

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

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

, (3,000.00)

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


, 7,000.00

1003043457A

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

10030434575

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date 10/7/10
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked


 PREPARER
 (3/2005)

10/12/10
 DATE PREPARED