	•	· ·				CEIMED A'L CENTE	· n
FEC FORM 3X	AND D	RT OF RE ISBURSE nan An Authorize	MENT	s	2010 APR	15 Ph 12: ;	
1. NAME OF COMMITTEE (in fu	TYPE OR PRI	• –	xample: If typin ver the lines.	ng, type	12FE4M5		
HAWA III	PITIOMETIR	LC PAC		<u></u>			
			<u>1. I. I. I.</u>				
ADDRESS (number and	street) 91412131	<u>9. WAIPA</u>	HUDE	SPOTI	STREE	TILL	
Check if differ than previousl reported. (ACC	y	<u>A</u> HU				6797]-	
2. FEC IDENTIFICA	TION NUMBER 🔻						DE 🔺
C0.0.3.2	0.143	3. IS THIS REPOR	1 9 2	NEW N) OR	AMEN (A)	IDED	
 4. TYPE OF REPO (Choose One) (a) Quarterly Repo April 15 Quarterly 	Prts:		3) []	May 20 (M5) Jun 20 (M6) Jul 20 (M7)	Aug 20 Aug 20 Sep 20 Oct 20 General (12	(M9)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) Runoff (12R)
October 1	Report (Q2)	AB-Election ABE-Election ABE-El	Convention (استا پسم	Special (125	5)	
July 31 M Report (N	Report (YE) id-Year (d) 30 on-election	Election on	General (300		Runoff (30R	in the State of	
Year Only Terminatio (TER)	, (WT) . Re	Election on				in the State of	Special (30S)
5. Covering Period	07 07	2010	through	03	· [3] · [2010	- <u></u>
I certify that I have exa Type or Print Name of	•	to the best of my kr Glehn M				omplete.	
Signature of Treasurer	phi	muz	tand	<u> </u>	ate <u>04</u>	661	2010
NOTE: Submission of fal	se, erroneous, or incomp	lete information may	subject the per-	son signing this			
Office Use Only						FEC FORI Rev. 12/20	

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Γ	- FEC Form 3X (Rev. 02/2003)	SUMMARY PAGE	Page 2
. W	/rite or Type Committee Name		······································
	Hawaii C	ptometriz PAC	· · · · · · · · · · · · · · · · · · ·
R	eport Covering the Period: From:	7 27 2070	. 0313712010
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2010		2283148
	(b) Cash on Hand at Beginning of Reporting Period	2283148	•
	(c) Total Receipts (from Line 19)	1984900	1984900
	 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	4.2 68048	4268048
7.	Total Disbursements (from Line 31)	602263	(00.2263
8 .	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	3.6.6.5785	3665785
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	C	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	
— Г	This committee has qualified as a multic	andidate committee. (see FEC FORM 1M)	

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

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For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

FEC Form 3X (Rev. 02/2003)	DETAILED SUMMARY PAGE of Receipts	Page 3
Write or Type Committee Name	waii Optometric PA	 ح
Report Covering the Period: From:	07 07 2010	··· 03' 27' 2010
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A) (ii) Unitemized	► <u>1.7,4.490.0</u>	
 (c) Other Political Committees (such as PACs) (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 		
Totals to Line 33, page 5) 12. Transfers From Affiliated/Other Party Committees		
 All Loans Received Loan Repayments Received Offsets To Operating Expenditures (Befunde Bebates etc.) 		0
(Refunds, Rebates, etc.)(Carry Totals to Line 37, page 5)16. Refunds of Contributions Made to Federal Candidates and Other		
Political Committees 17. Other Federal Receipts (Dividends, Interest, etc.)		24.0.000
 Transfers from Non-Federal and Levin (a) Non-Federal Account (from Schedule H3) 		
(b) Levin Funds (from Schedule H5)(c) Total Transfers (add 18(a) and 18(b)		
	hang tana dina dina dara ka di karaka di	
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	1.9.849.0.0	1984900
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	• 1984900	1984900

DETAILED SUMMARY PAGE



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	FEC Form 3X (Rev. 02/2003)	of Disbursements	Page 5
	ili. 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)	1744900	1744900
34.	Total Contribution Refunds (from Line 28(d))	C	
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	1744900	1744900
6.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	6.27-6.3	6.2.263
7.	Offsets to Operating Expenditures (from Line 15, page 3)		
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	6.2.2.63	67763

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	HEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE / OF 70 (check only one)
			for each category of the Detailed Summary Page	C 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and S for commercial purposes, other than using the	tatements managements managements and a	ay not be sold or used by any penderess of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
$\left \right\rangle$	NAME OF COMMITTEE (In Full) Hawaii Opto	metri	, PAC	
Α.	Full Name (Last, First, Middle Initial) Kozohana, She	ri`		Date of Receipt
	Mailing Address 2226 Liliha S	}/		0105 2010
	city Honolula	State	Zip Code 96817	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee	C		30000
	Name of Employer Self	Occupation C	ptometrist	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼		30000	
В.	Full Name (Last, First, Middle Initial)			Date of Receipt
	Mailing Address 563 Farrington 1	Hwy	7.0.4	07 05 2010
	^{city} Kapolei	State	Zip Code 96707	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C .		30000
	Name of Employer Self	Occupation	stametrist	
	Receipt For:	Aggregate	Year-to-Date ▼	
<u>с.</u>	Full Name (Last, First, Middle Initial)			Date of Receipt
	Mailing Address 1655 Hoomaike		Zin Ooda	07 72 2010
	City Pearl City	State	Zip Code 96782	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C .		30.0.0.0
	Name of Employer Self	Occupation	tometrist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300,0,0	
s	UBTOTAL of Receipts This Page (optional)			90000
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	y information copied from such Reports and S for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full)	rwaii	Optometric	PAC
A.	Full Name (Last, First, Middle Initial) Belisle, Glehn Mailing Address			Date of Receipt
	Mailing Address 901 Kuhið Hwy City	7 State HT 1	Zip Code	0712010
	FEC ID number of contributing		96746	Amount of Each Receipt this Period
	federal political committee.		underson de sou de la constituir de la const	20.0.00
	Name of Employer Self- Receipt For:	Occupation OP	tometrist	
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ ,20,0,0,0	
в.	Full Name (Last, First, Middle Initial)	ilune	· · · · · · · · · ·	Date of Receipt
	1040 S. King St.			07 77 2010
	City Honolula	State	Zip Code 96814	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	enterrationer provider - ar - i farrier anterrationer provider - ar - i farrier	2.0.0.0.0
	Name of Employer	Occupation	tometrist	
	Receipt For: Primary ☐ General Other (specify) ▼		Year-to-Date ▼	
<u> </u>	Full Name (Last, First, Middle Initial) Sakai, Jeff		····	Date of Receipt
	Mailing Address 750 Palan; Auc			01/01/0010
	City Waranaz	State HI	Zip Code 96792	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	anders war and a set of a contract of the set	20000
	Name of Employer Self-	Occupation	primetrict	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ RD	
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	ny information copied from such Reports and St for commercial purposes, other than using the			
\square	NAME OF COMMITTEE (In Full)			
2	Hawaii Opti	metri	· PA-c	
A	Full Name (Last, First, Middle Initial) Baum Marvin			Date of Receipt
•	Mailing Address Stadium Maul			01/27/2010
	city Honolulu	State H (Zip Code 96818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C .		30.0.00
	Name of Employer Self	Occupation	ptometrist	
	Receipt For:	Aggregate	Year-to-Date V	
	Other (specify) ▼		30000	
B				Date of Receipt
	Mailing Address <u>94536</u> Lumianan	54	Tr. Oak	011 27 2010
	City Waipchu	State H (Zip Code 96797	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C .	สมุณาร์การสำนักสารสารสารสารสารสารสารสารสารสารสารสารสารส	30000
	Name of Employer Self	Occupation	stametrist	
	Receipt For:	Aggregate	Year-to-Date V	
	✓ Primary General Other (specify) ▼		30000	
C		nsti-		Date of Receipt
	Mailing Address 40 Aulike St		To Oak	07 27 2010
	<u>City</u> Kailna	State H 1	Zip Code 96734	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	ang an	30,000
	Name of Employer	Occupation	tometrist	
	Receipt For:	Aggregate	Year-to-Date V	
	Other (specify) ▼		300,0,0	
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	y information copied from such Reports and St for commercial purposes, other than using the			
Ν	NAME OF COMMITTEE (In Full)			
V	Hawaii Opto,	metri	· PA-C	
A .	Full Name (Last, First, Middle Initial) Arakaki, Linda			Date of Receipt
				01 27 2010
	City Waipahn	State H1	Zip Code 96797	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		30000
	Name of Employer Self	Occupation	ptometrist	
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	 ✓ Primary ✓ General Other (specify) ▼ 		3.0.0.00	
в.	Full Name (Last, First, Middle Initial) Nagahino, Ken			Date of Receipt
	Mailing AddHess <u>91803</u> Papipi R City	State	Zip Code	011 27 207.0
	Ewa Beach	State H I	96706	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C :	······································	30000
	Name of Employer Set f	Occupation	stametrist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Cther (specify) ▼	L	30000	
с.	Full Name (Last, First, Middle Initial) Nagahiro, Rac	· · ·	· · · · · · · · · · · · ·	Date of Receipt
	Mailing Address Lahaina Square			01/27/2010
	city Lahaina	State	Zip Code 96761	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C .		30000
	Name of Employer Self	Occupation	tometrist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 30000	
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	y information copied from such Reports and Si for commercial purposes, other than using the			
$\left \right\rangle$	NAME OF COMMITTEE (In Full) Hawaii Opto.	metri	, PA-c	
К А.	Full Name (Last, First, Middle Initial)		······	Date of Receipt
	Mailing Address 700 Keean moken City	S]	Zip Code	011 27 2010
	Honswin	HI	96814	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300,00
	Name of Employer Self	Occupation	ptometrist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 30000	
В.	Full Name (Last, First, Middle Initial) May David			Date of Receipt
	Mailing Address 848 Ala Lilikoi	St	7.0.1	07/27/2010
	city Honolulu	State	Zip Code 96818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C .		3.00,00
	Name of Employer Sel F	Occupation	stometrist	
	Receipt For: ✓ Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	
с.	Full Name (Last, First, Middle Initial) Seri Kawa, Alac			Date of Receipt
	Mailing Address 848 Ala Lilikoi		Zip Code	07 27 2010
	- Honolula	HI	96818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		30,0,0,0
	Name of Employer	Occupation	tometrist	
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	04	
/ Hawaii Optimetr	ic PA-c	
Full Name (Last, First, Middle Initial) A. MAEda, Andrew		Date of Receipt
Mailing Address 1234 Kilanen Avc City	Zip Code	011272010
Hilo Hi	96720	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		30009
Name of Employer Occupat	optometrist-	
Receipt For: Aggrega	te Year-to-Date ▼	
Other (specify) ▼	30000	
Full Name (Last, First, Middle Initial) B. Marda, Jennifer		Date of Receipt
Mailing Address 1234 Kilanca Aur		07 27 2010
City Hilo State	Zip Code 9672-0	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		30000
Name of Employer Occupat	ptametrist	
Receipt For: ✓ Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial) C. Kuwabara, Dennis	······································	Date of Receipt
Mailing Address 94748 Hikimoc St City	Zin Code	07 27 2010
City Waipaha HI	Zip Code 96797	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		30000
Name of Employer Occupat	ptometrist	
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S	HEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 7 OF 90 (check only one)
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	y information copied from such Reports and Si for commercial purposes, other than using the			
Ν	NAME OF COMMITTEE (In Full)			
Z	Hawaii Opti	metri	· PA-C	
A.	Full Name (Last, First, Middle Initial) Full Salci, Fra			Date of Receipt
	Mailing Address 850 Kamchame	ha H	w.y	011/27/2010
	City Pearl City	State H \	Zip Code 96782	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C .		30000
	Name of Employer Self	Occupation C	ptometrist	
	Receipt For:	Aggregate	Year-to-Date ▼	
_	Other (specify) ▼		30000	
в.	Full Name (Last, First, Middle Initial)			Date of Receipt
	Mailing Address 1010 Pensacola City 11	State	Zin Code	0.1 27 20.1.0
	Hondula	<u>H</u> I	Zip Code 96814	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		30000
	Name of Employer	Occupation	stametrist	
	Receipt For:		Year-to-Date V	
	 <i>V</i> Primary General Other (specify) ▼ 		300,00	
с.	Full Name (Last, First, Middle Initial) Ohiznka, Home	r	·····	Date of Receipt
	Mailing Address 1010 Pensacola	St-		01 57 2010
	City Honowia	State	Zip Code 96814	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		30000
	Name of Employer Self	Occupation	tometrist	-
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.0.0	
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S	HEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE SOF 90
IT	EMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)
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Ar or	y information copied from such Reports and Statema for commercial purposes, other than using the name	ants may not be sold or used by any per and address of any political committee	arson for the purpose of soliciting contributions to solicit contributions from such committee.
\mathbb{N}	NAME OF COMMITTEE (In Full)		
Z	Hawaii Optime	tric PAC	
A.	Full Name (Last, First, Middle Initial)	· · · · · · · · · · · · · · · · · · ·	Date of Receipt
•	Mailing Address 4100 Rice St		0.7 27 2010
	city Lihue f	ate Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		300,00
	Name of Employer Occ	optometrist	-
		regate Year-to-Date ▼	
	 ✓ Primary ✓ General Other (specify) ▼ 	30000	
В.	Full Name (Last, First, Middle Initial) Schmalle, Traci		Date of Receipt
	Mailing Address 94348 Leleaka	31-	0.1 27 201.0
	city Mililani H	ate Zip Code 1 96789	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		30000
	Name of Employer Occ	upation optometrist	
	Receipt For: Ago	regate Year-to-Date ▼	- an an and a second
	✓ Primary General Other (specify) ▼	30000	
	Full Name (Last, First, Middle, Initial)		
C.	_ Shoji, Peter	······································	Date of Receipt
		د	01/27/2010
	city Honolula H	ate Zip Code 1 96815	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		30,0,0,0
	Name of Employer Occ	optometrist	
	Receipt For: Agg Primary General Other (specify) ▼	regate Year-to-Date ▼ 300,0,0	
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S	CHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 9 OF 70		
ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)		
••		Detailed Summary Page	11a 11b 11c 12 13 14 15 16 117		
A	y information copied from such Reports and Staten	nents may not be sold or used by any pe	erson for the purpose of soliciting contributions		
or	for commercial purposes, other than using the name	ne and address of any political committee	to solicit contributions from such committee.		
$\left \right\rangle$	NAME OF COMMITTEE (In Full) Hawaii Optimi	etric PAC			
Ľ					
A.	Full Name (Last, First, Middle Initial) Full Saki, James	.	Date of Receipt		
	Mailing Address 94824 Moloalo		01/27/2010		
	^{City} Waipaha	state Zip Code HI 96797	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.		30,0,0,0		
	Name of Employer Oc Self	optometrist			
	Receipt For: Ag Primary General	gregate Year-to-Date 🔻			
	Other (specify) ▼	30000			
в.	Full Name (Last, First, Middle Initial) Miyashiro, Gran	+	· Date of Receipt		
	Mailing Address 325 E. Makaala City	St Zip Code	07 27 201.0		
	Hilo	H 96720	Amount of Each Receipt this Period		
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	Self	optometrist			
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C.	Full Name (Last, First, Middle Initial)		Date of Receipt		
		Blud	011 30 2010		
	City Honolula	State Zip Code H 1 96814	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.		30000		
	Name of Employer Oc	optometrist			
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	y information copied from such Reports and Si for commercial purposes, other than using the			
$\left \right\rangle$	NAME OF COMMITTEE (In Full) Hawaii Opti	metri	c PA-c	
Α.	Full Name (Last, First, Middle Initial) Tanaka, Glen			Date of Receipt
	Mailing Address 1831 S. King S. City 11		Zip Code	<u>[]</u> [] [] [] [] [] [] [] [] [] [] [] [] []
	Honolulu	State	96813	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C .	And the second s	300,00
	Name of Employer	Occupation	ptometrist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Other (specify) ▼	L	30000	
В.	Full Name (Last, First, Middle Initial) UEda, Jacque	line		Date of Receipt
	Mailing Address 1600 Kapiolani	Blu		02'04'2010
	City Honolulu	State	Zip Code 96814	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		30000
	Name of Employer Self	Occupation	stametrist	
	Receipt For:	I I	Year-to-Date V	
	Other (specify) ▼		30000	
с.	Full Name (Last, First, Middle Initial)	ân	·····	Date of Receipt
	Mailing Address 1010 Pengacola 4	31		02 64 2010
	City Honolulu	State HI	Zip Code 96814	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	and any advanced and a second	30000
	Name of Employer Self	Occupation	tometrist] · · · · · · · · · · · · · · · · · · ·
	Receipt For:	Aggregate	Year-to-Date V	
	Other (specify) ▼	L	30000	
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE OF (check only one) U11a 11b 11c 12
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any	Derson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Hawaii Opti	metric PA-c	
Full Name (Last, First, Middle Initial) A. <u>HIVOKAWA</u> JAC Mailing Address		Date of Receipt
Mailing Address 1820 Algaroba City Honolulu	State Zig Code HI 96826	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		300,00
Name of Employer Self	occupation optometrist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	2
B. Kubo Brian Mailing Address		Date of Receipt
333 A Keahol	State Zip Code	
FEC ID number of contributing federal political committee.	HI 96825	Amount of Each Receipt this Period
Name of Employer Self	optometrist	
Receipt For:	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) C. <u>Camblor</u> , Ange	1	Date of Receipt
Mailing Address 479 Mililani St City	State Zip Code	<u> 22 / 24 / 2010</u>
FEC ID number of contributing federal political committee.	<u>H1 96720</u>	Amount of Each Receipt this Period
Name of Employer Self	Occupation Optometrist	
Receipt For: Primary ☐ General Other (specify) ▼	Aggregate Year-to-Date ▼	3
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SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 1 OF 2-0 (check gnly one)		
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NAME OF COMMITTEE (In Full)	0.4			
/ Hawaii Opti.				
Full Name (Last, First, Middle Initial) A. <u>Fuil noto</u> , David		Date of Receipt		
Mailing Address 1441 Kapielani		6762 673 67		
City Honolula	State Zip-Code HI 76814			
FEC ID number of contributing		Amount of Each Receipt this Period		
federal political committee.		30000		
Name of Employer Self	Occupation optometrist			
Receipt For:	Aggregate Year-to-Date ▼			
✓ Primary General Other (specify) ▼	30000			
Full Name (Last, First, Middle Initial) B. (ASNGA, LIANC		Date of Receipt		
	hana Ave	67.02 (207.0		
City Mililani	State Zip Code HI 76789	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	30000		
Name of Employer Self	optometrist			
Receipt For:	Aggregate Year-to-Date ▼			
Other (specify) ▼	30000			
Full Name (Last, First, Middle Initial) C. Tham, Irinh		Date of Receipt		
Mailing Address 1450 Ala Mua	na Blud	22 72 8010		
city Honounla	State Zip Code H1 96814	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	30000		
Name of Employer Self	Occupation Optometrist			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼			
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SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 13 OF 20
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	y information copied from such Reports and S for commercial purposes, other than using the			
Ν	NAME OF COMMITTEE (In Full)			
\mathbb{Z}	Hawaii Opti		C PA-C	
A.	Full Name (Last, First, Middle Initial) Keynolds, Rond	ald		Date of Receipt
•	Mailing Address 95390 Kuahelan		e	22 72 2010
	^{City} Mililan i	State HI	Zin Code 96789	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C .		300,00
	Name of Employer Self	Occupation	ptometrist	
	Receipt For:	Aggregate	Year-to-Date ▼	
_	Other (specify) ▼		3.0.0.0	
В.	Full Name (Last, First, Middle Initial)	poffr	eg	Date of Receipt
	Full Name (Last, First, Middle Initial) Kegholds, Ge Mailing Address 95390 Kuahela City	ni A	Zig Code	[2] [2] 2010
	Mililani	State	96789	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		30000
	Name of Employer Self	Occupation	stametrist	
	Receipt For: ✓ Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ A 300000	
<u>с.</u>	Full Name (Last, First, Middle Initial) Eq. Koger			Date of Receipt
	Mailing Address 377 Keahole City,,	St	Zin Code	[22'[17' 2010
	Honolulu	State	Zip Code 96825	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30,0,0,0
	Name of Employer Se (f	Occupation	tometrist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300,00	
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SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 14 OF 72 (check only one)
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<u>,</u>		13 14 15 16 17
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NAME OF COMMITTEE (In Full)	<u></u>	
/ Hawaii Optime	tric PAC	
Full Name (Last, First, Middle Initial) A. MATSUAA, Genald		Date of Receipt
Mailing Address 30 Aulike St.		2317812010
City Kailua H	tate Zip Code FI 96734	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		30000
self	optometrist	
Receipt For: Age Primary General	pregate Year-to-Date V	
Other (specify) ▼	30000	
Full Name (Last, First, Middle-Initial) B. MOON, TIMOHY		Date of Receipt
Mailing Address 1441 Kapidlani Blu City 11	d To Goda	122 128 2010
City Honolulu A	tate Zip Code FI 96814	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		300,00
Name of Employer Occ	optometrist	
Receipt For: Agg	gregate Year-to-Date ▼	
Other (specify) ▼	30000	
Full Name (Last, First, Middle Initial) C, Duame		Date of Receipt
Mailing Address JS S. King St		63 23 Rolo
City Honolulu H	tate Zip Code 1 96826	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		30,0,0,0
Name of Employer Occ	optometrist	
	gregate Year-to-Date ▼ 300,00	
SUBTOTAL of Receipts This Page (optional)	······	90000
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SCHEDULE A (FEC Form 3X)			Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 15 OF 70 (check only one)
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	y information copied from such Reports and S for commercial purposes, other than using the			rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Hawaii Opto	metri	PAC	
	Full Name (Last, First, Middle Initial) Fujinaka, Mile:	s		Date of Receipt
	Mailing Address 98311 Pali Mon			0.2 / 24 / 2010
	city Aiea	State	Zip Code 96701	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		30000
	Name of Employer Self	Occupation C	ptometrist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Other (specify) ▼	L	3.0.0.00	
в,	Full Name (Last, First, Middle Initial) Shiro, Douglas			Date of Receipt
	Mailing Address 31 E Lanikaul	a St		62' 24' 2010
	city Hilo	State	Zin Code 96720	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		3.0.00
	Name of Employer Self	Occupation	stametrist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Other (specify) ▼	L	30000	
С.	Full Name (Last, First, Middle Initial) Hamada, Weska			Date of Receipt
	Mailing Address 960 Center St	/		0212412010
	^{City} Wahiawa	State H (Zip Code 96786	Amount of Each Receipt this Period
	FEC ID.number of contributing federal political committee.	С		30000
	Name of Employer Self	Occupation OP	tometrist	
	Receipt For: Primary ☐ General Other (specify) ▼	Aggregate	Year-to-Date ▼ 	
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ITEMIZED RECEIPTS			for each category of the Detailed Summary Page	(check only one)
	<u></u>			13 14 15 16 17
				rson for the purpose of soliciting contributions to solicit contributions from such committee.
	ME OF COMMITTEE (In Full)		<u>^</u>	
4	Hawaii Opti	metri	C PA-C	
A	Name (Last, First, Middle Initial)			Date of Receipt
Mai	Kailus Kong	<u>Lini</u> r	Hwy	07 18 2010
City	Kailua-Kona	State	Zip Code 96740	Amount of Each Receipt this Period
	C ID number of contributing pral political committee.	C		30009
Nan	ne of Employer Self	Occupation C	ptometrist	
Rec	eigt For:	Aggregate	Year-to-Date V	
Ë	Other (specify) ▼		30000	
Full B.	Name (Last, First, Middle Initial) Uashioka, Nelso	on		Date of Receipt
	Name (Last, First, Middle Initial) <u> <u> <u> </u> <u> </u></u></u>			03 29 2010
City	Honolula	State	Zip Code 96816	Amount of Each Receipt this Period
	C ID number of contributing aral political committee.	С		30000
Nar	ne of Employer Self	Occupation	stometrist	
	eipt For:	Aggregate	Year-to-Date V	-
-	Primary General Other (specify) ▼		30000	
C.	Name (Last, First, Middle Initial) Matshgama, W	ayne		Date of Receipt
	1109 12th Ave			23 29 2010
City	Honolula	State HI	Zip Code 96816	Amount of Each Receipt this Period
	C ID number of contributing aral political committee.	C .		30000
Nan	ne of Employer Se (f	Occupation	tometrist	
	eipt For: Primary ☐ General Other (specify) ▼	Aggregate	Year-to-Date ▼ 30000	
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			Detailed Summary Page	411a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and St for commercial purposes, other than using the			son for the purpose of soliciting contributions
\sum	NAME OF COMMITTEE (In Full) Hawaii Opto,	metri	, PA-c	
Ľ_	Full Name (Last, First, Middle Initial)			·
Α.	Van, Alicia			Date of Receipt
	Mailing Address 230 N.O.e St.	-		23 29 2010
	city Kihei	State	Zip Code 96753	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		30000
	Name of Employer Self	Occupation	ptometrist	
	Receipt For:	Aggregate	Year-to-Date V	
	 ✓ Primary General Other (specify) ▼ 		30000	
в.	Full Name (Last, First, Middle Initial)	in		Date of Receipt
	Mailing Address 80 Mahalani	St.		03 29 2010
	city Wailuku	State	Zip Code 96793	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		300.00
	Name of Employer Self	Occupation	stometrist	
	Receipt For:	Aggregate	Year-to-Date V	
	Other (specify) ▼		30000	
С.	Full Name (Last, First, Middle Initial)			Date of Receipt
	Mailing Address 1580 Makaloa	57.		130 2010
	city Honolula	State	76814	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C .		30000
	Name of Employer Self	Occupation	tometrist	
	Receipt For:	Aggregate	Year-to-Date V	
	Other (specify) ▼		30000	
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		Detailed Summary Page	13 14 15 16 17		
	y information copied from such Reports and Statements for commercial purposes, other than using the name an				
\square	NAME OF COMMITTEE (In Fuli)				
Z	Hawaii Optimetr	ic PAC			
A.	Full Name (Last, First, Middle Initial)		Date of Receipt		
	Mailing Address 75166 Kalani St		01 27 2010		
	City Kailug-Kona HI	Zip Code 96740	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	*****	60000		
	Name of Employer Occupa	ion optometrist			
	Receipt For: Aggreg:	ate Year-to-Date V			
	Other (specify) ▼	60000			
В.	Full Name (Last, First, Middle Initial) Honda, Jay		Date of Receipt		
	Mailing Address 75166 Kalani St		a.1 27 2010		
	City Kailua-Kona HI	Zip Code 96740	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.				
		tion ptametrist			
	Receipt For: Aggreg ✓ Primary General Other (specify) ▼	ate Year-to-Date ▼ 30020			
С.	Full Name (Last, First, Middle Initial) Matsugama Gerald		Date of Receipt		
	Mailing Address 1109 12th Aue	Zip_Code	[a] [] (B)		
	City Honolula 41	96816	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.		30,000		
	Name of Employer Occupa	ptometrist			
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or for commercial purposes, other than using the	tatements may not be sold or used by any name and address of any political commi	y person for the purpose of soliciting contributions the to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) Hawan Optometric PAC					
A. Durham, Jan	Date of Receipt				
Mailing Address 110 Kaakin	a P1.	01 27 2010			
City Ewg Beach	State Zip Code HI 96706	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.		150.0.0			
Name of Employer Sel C	Occupation Optometrist				
Receipt For: Primary ☐ General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500	0			
Full Name (Last, First, Middle Initial) B. Takahashi', Ed	win	Date of Receipt			
Mailing Address 94235 Leoka	St	07'27'2010			
city Waipahu	State Zip Code HI 96797	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	20.000			
Name of Employer Self	Occupation Optometrist				
Receipt For: Primary ☐ General Other (specify) ▼	Aggregate Year-to-Date ▼	e i			
Full Name (Last, First, Middle Initial) C. Tanaka, Stanf	CG	Date of Receipt			
Mailing Address 1831 S. King	St.	021 [18] [2010]			
<u>City</u> Honolulu	State Zip Code [+] 76874	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	20,0,00			
Name of Employer	Occupation optimetrist-				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 20000	2]			
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	AME OF COMMITTEE (In Full) Hawaii Op	tometric.	PAC	
К А.	ull Name (Last, First, Middle Initial) Kunimura, GIEH.		· · ·	Date of Receipt
M 	Hillo Lagoon Cent			0105 101 2010
	ity Hilo	State Zip Co HI 96	,720	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	С		30,000
	Self	optome	trisl	-
R	eceipt For: ✓ Primary General Other (specify) ▼	Aggregate Year-to-Dat		
В.	III Name (Last, First, Middle Initial) Matsushima, Ahi	ne		Date of Receipt
M	ailing Address 5 Handing M	0313712010		
с –	Honolulu	State Zip Co H1 96	816	Amount of Each Receipt this Period
fe	EC ID number of contributing deral political committee.	С		30000
	self	Occupation Optome-	trist	
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	Mailing Address			
c _		State Zip Co	de	Amount of Each Receipt this Period
fe	EC ID number of contributing deral political committee.	С		
N	ame of Employer	Occupation		
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	CHEDULE A (FEC Form 3X)	FOR LINE NUMBER: PAGE / OF /								
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	NAME OF COMMITTEE (In Full) Hawan	ې بې								
Α.	Full Name (Last, First, Middle Initial) Hahabusa Coll	Date of Receipt								
	Mailing Address PO Box 14	16 State	Zip Code	0102 2010						
	City Honolulu	HI	96806	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	Ci		24.0.0.0						
	Name of Employer	Occupation		Refund of exces						
	Receipt For:	Aggregate	Year-to-Date V							
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в.	Full Name (Last, First, Middle Initial)			Date of Receipt						
	Mailing Address									
	City	State	Zip Code	Amount of Each Receipt this Period						
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	Name of Employer	Occupation		-						
	Receipt For: Primary General Other (specify) ▼	1	Year-to-Date V							
— с.	Full Name (Last, First, Middle Initial)			Date of Receipt						
0.	Mailing Address			Than I Least have and						
	City	State	Zip Code	Amount of Each Receipt this Period						
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	Name of Employer	Occupation	· · ·							
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FEC	Schedule	A	(Form	3X)	(Revised	1/01)

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SCHEDULE B (FEC Form 3X)									
ITEMIZED DISBURSEMENTS	(check only	one)							
Federal Candidates	27	28a 28b 28c 29 30b							
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)	' na i c s	£ 1							
/	Optometriz	PNC							
Full Name (Last, First, Middle Initial)			Date of Disbursement						
Lhoyye, Daniel	0105 30 20								
Mailing Address PO Buy 1196			00 00 0010						
City Honomica &	itate Zip Code f I 96807								
Purpose of Disbursement		071	Amount of Each Disbursement this Period						
Candidate Name Daniel K. Insuye		Category/	200000						
Office Sought: House Disburser	ent For:	Туре							
	Primary General								
State: H (District:	Other (specify) 🔻								
Full Name (Last, First, Middle Initial)			Date of Disbursement						
Hanabusa, Colleen			6702 187 2010						
Mailing Address POBUS 1416									
	tate Zip Code HI 96806								
Purpose of Disbursement	······································		Amount of Dark Diskurgement this Daried						
<u>Gandiate Name</u> <u>Colleen</u> Hanchuse	lection !!	Category/	Amount of Each Disbursement this Period						
Colleen Hanabuse	×	Туре	24.0.0.0						
Office Sought: House Disburserr Senate	ent For: Primary General								
States 1/1 District	Other (specify)								
State: H District: Full Name (Last, First, Middle Initial)	Special elect	<u>m</u>							
C.			Date of Disbursement						
Mailing Address									
City S	tate Zip Code		······································						
Purpose of Disbursement									
Candidate Name	Amount of Each Disbursement this Period								
		Category/ Type							
Office Sought: House Disbursem	ent For: Primary General								
	Other (specify)								
State: District:									
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SCHEDULE B (FEC Form 3X)	<u> </u>	FOR LINE I	NUMBER: PAGE / OF /						
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only							
	Detailed Summary Page	215	28a 28b 28c 1/29 30b						
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/	i Optometric	. PA	С						
Full Name (Last, First, Middle Initial)			Date of Disbursement						
Citizens for Respons	02 06 2010								
Mailing Address Box 23031		<u>ve</u> <u>ve</u> <u>e</u> <u></u>							
	City Honolulu H1 96823								
Purpose of Disbursement fun draiser	······		Amount of Each Disbursement this Period						
Candidate Name		OLL Category/							
Office Sought: House Disbursem	ent For:	Туре	1,000.00						
Senate S	Primary General Other (specify) 		·						
State: District:									
Full Name (Last, First, Middle Initial) B.			Date of Disbursement						
Mailing Address									
	tate Zip Code		an ang ang ang ang ang ang ang ang ang a						
Purpose of Disbursement									
	î	Amount of Each Disbursement this Period							
Candidate Name	Category/ Type								
	ent For: . Primary General Dther (specify) ▼		anna an						
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FEC Schedule B (Form 3X) Rev. 02/2003

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