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Image# 202005289239564679

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)						
	Hoomanawanui, Jonathan, , ,						
(b) Address (number and street) S5-1280 Kumaipo Street			heck if address changed			Candidate's FEC Identification Number H0HI02197	
(c) City, State, and ZIP Code					3. Is This New Amended	
	Waianae		HI	9679	2	Statement (N) OR (A)	
4. Pa	arty Affiliation	5. Office Sough	nt		6. State & Dist	rict of Candidate	
	OTHER	House			HI	02	
	DE	SIGNATION	OF PR	INCIPAL	CAMPAIGN	N COMMITTEE	
7. II	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 (year of election)						
N	NOTE: This designation should be filed with the appropriate office listed in the instructions.						
(a) Name of Committee (in full) FRIENDS OF JONA	THAN HC	OMAN	AWANL	II		
(b) Address (number and street)						
	1254 WANAKA STREET						
	85-1280 KUMAIPO STREET,	WAIANAE HI					
(c) City, State, and ZIP Code						
	HONOLULU				HI	96818	
Ca N	nereby authorize the following name andidacy. OTE: This designation should be following name of Committee (in full)					nmittee, to receive and expend funds on behalf of my	
(a	ALOHA AINA PART	Y LLC					
(b) Address (number and street) 89-110 NANAKULI AVE						
(c) City, State, and ZIP Code						
	WAIANAE				HI	96792	
	Loortify that I have eve	minad this State	mont and to	the best of	my knowlodgo a	nd belief it is true, correct and complete.	
	·	IIIIIIeu IIIS State	enieni anu io	une best of	Thy knowledge a	· · · · · · · · · · · · · · · · · · ·	
Signature of Candidate						Date	
Ноог	nanawanui, Jonathan, , ,			[Elec	tronically Filed]	05/28/2020	
NOT	E: Submission of false, erroneous,	or incomplete in	nformation n	nay subject t	he person signir	ng this Statement to penalties of 2 U.S.C. §437g.	
NOT	E: Submission of false, erroneous,	or incomplete in	nformation m	nay subject t	he person signir	ng this Statement to penalties of 2 U.S.C. §437g.	

FEC FORM 2 (REV. 02/2009)