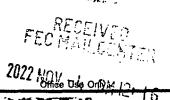
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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee



FEC FORM 3

(Revised 02/2003)

| Lise is it is it is the proof (22) Lise is it is true, correct and complete. Lise is it is i | NAME OF COMMITTEE (in full) | TYPE OR PRINT | | xample: If t ver the line | | type | 12F | E4M5 | | 10 |
|--|---|-------------------------------------|--|---------------------------------------|-------------------|-----------|-----------|--------------|---------|------------|
| STATE ▼ DISTRICT C 0 0 3 8 3 5 6 2 3. IS THIS REPORT (N) OR (A) 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) X July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Termination Report (TER) Election on Special (30S) Termination Report (TER) STATE ▼ DISTRICT (A) HI I 0 , 2 Fund (12F) Convention (12C) Special (12S) Fund (30R) Special (30S) Fund (30R) Special (30S) In the State of State of 1 certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type of Print Name of Treasurer Calvin C. Ching | ADDRESS (number and street) Check if different than previously | 11818181 K | ALAK | UIA1 14 | A.V.E | <u> </u> | E, # | 1.7.0.3 | | |
| (a) Quarterly Reports: April 15 Quarterly Report (Q1) X July 15 Quarterly Report (Q2) October 15 Quarterly Report (YE) January 31 Year-End Report (YE) (c) 30-Day POST-Election Report for the: General (12G) Flection on Election on State of General (12G) Flection on State of Special (30G) Flection Report for the: General (30G) Flection Report for the: General (30G) Flection on Special (30S) Termination Report (TER) Flection on Calvin C. Ching | • | | 3. IS THIS | • X | | OR | | | STATE ▼ | DISTRICT |
| General (30G) Runoff (30R) Special (30S) Termination Report (TER) Election on State of Covering Period Tourify 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 Calvin C. Ching | (a) Quarterly Reports: ' April 15 Quarterly F X July 15 Quarterly R October 15 Quarter | Report (Q1) Report (Q2) Report (Q3) | Transport of the second of the | Primary Convent | (12P) ion (120 | C) ; | Sp | ecial (12S) | in the | off (12R) |
| 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 Calvin C. Ching | | | Į, | General | (30G) | | : Ru | • | in the | cial (30S) |
| The state of the s | I certify that I have examined the | is Report and to the | e best of my o | · · · · · · · · · · · · · · · · · · · | | ief it is | true, con | rect and con | mplete. | 0 2 2 |

FE5AN018

Office Use

Only

SUMMARY PAGE

of Receipts and Disbursements

Page 2

FEC Form 3 (Revised 02/2003)

Schedule C and/or Schedule D)

| W | rite (| or Type Committee Name FRIENDS | S OF MATT MATSUNAGA - CONGR | RESS |
|-----|--------|---|--|---------------------------------|
| R | eport | t Covering the Period: From: | 7 7 7 7 7 7 To: | 0 6 7 3 6 7 2 2 2 |
| 6. | Nal | Contributions (other than loans) | COLUMN A This Period | COLUMN B Election Cycle-to-Date |
| | (a) | Total Contributions (other than loans) (from Line 11(e)) | 0 0 0 | 0 0 0 |
| | (p) | Total Contribution Refunds (from Line 20(d)) | 0 0 0 | 0 0 0 |
| | (c) | Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) | 0.0.0 | 0.00 |
| 7. | Net | Operating Expenditures | | |
| | (a) | Total Operating Expenditures (from Line 17) | 0 0 0 | o o o |
| | (b) | Total Offsets to Operating Expenditures (from Line 14) | 0.00 | 0.0.0 |
| | (c) | Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) | 0 0 0 | 0 0 0 |
| 8. | | ch on Hand at Close of corting Period (from Line 27) | 0 0 0 | |
| 9. | the | ots and Obligations Owed TO Committee (Itemize all on ledule C and/or Schedule D) | 0 0 0 | |
| 10. | | ots and Obligations Owed BY Committee (Itemize all on | Anna de la contraction de la c | |

For further information contact:

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

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

FE5AN018

2022-11-04-0M:00425744

DETAILED SUMMARY PAGE

of Receipts

Page 3

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

FRIENDS OF MATT MATSUNAGA - CONGRESS

Report Covering the Period:

From:

| | 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 0 0 | 0 0 0 |
| | (ii) Unitemized | 0 0 0 | 0 0 0 |
| | (b) Political Party Committees | 0.00 | 0.00 |
| | (d) The Candidate | 0.0.0 | 0.0.0 |
| 12. | (add Lines 11(a)(iii), (b), (c), and (d)) TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0.00 | , |
| 13. | LOANS: (a) Made or Guaranteed by the Candidate | 0.00 | 0 0 0 |
| | (b) All Other Loans | 0.0.0 | 0.0.0 |
| 14. | OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | 0 0 0 | 0 0 0 |
| 15. | OTHER RECEIPTS (Dividends, Interest, etc.) | 0 0 0 | 0.00 |
| 16. | TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) | 0.0.0 | 0 0 0 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

COLUMN A COLUMN B II. DISBURSEMENTS **Total This Period Election Cycle-to-Date** 0,00 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.0 AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: Of Loans Made or Guaranteed by the Candidate..... (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other 0 0 Than Political Committees..... 0 0 0 0 Political Party Committees..... Other Political Committees (such as PACs) (d) TOTAL CONTRIBUTION REFUNDS 0 0 (add Lines 20(a), (b), and (c))..... 0 0 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS 0 0 (add Lines 17, 18, 19(c), 20(d), and 21) III. CASH SUMMARY 0.0.0 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...... 24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... 25. SUBTOTAL (add Line 23 and Line 24) 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

FOR LINE NUMBER: Use separate schedule(s) for each category of the Detailed Summary Page

| OR LINE NUMBER: | | | | PAGE | 5 O F | 13 | |
|-----------------|---------|------|--|------|--------------|----|----|
| he | ck only | one) | | | | | |
| | 11a | 11b | | 11c | 11d | | |
| | 12 | 13a | | 13b | 14 | | 15 |

5 of 13

| | d Statements may not be sold or used by any per the name and address of any political committee | |
|--|--|--|
| NAME OF COMMITTEE (In Full) | IATSUNAGA - CONGRESS | |
| Full Name (Last, First, Middle Initial) | N/A | |
| Mailing Address | | Date of Receipt |
| City | State Zip Code | Spannings Laboritoned 475.7 dissection (Library |
| FEC ID number of contributing federal political committee. | C) | Amount of Each Receipt this Period |
| Name of Employer | Occupation | Rosestandant watericker fundin tom this same |
| Receipt For: Primary General Other (specify) | Election Cycle-to-Date | |
| Full Name (Last, First, Middle Initial) | N/A | Date of Receipt |
| Mailing Address | | M T M / D T D / Y T Y T Y Y Y |
| City | State Zip Code | jumphared Sandhard Sanghardeside |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period |
| Name of Employer | Occupation | Franchiser Court Seculialistic Court Seculial Seculiaries Court Se |
| Receipt For: Primary General Other (specify) | Election Cycle-to-Date | |
| Full Name (Last, First, Middle Initial) | N/A | Date of Receipt |
| Mailing Address | | MAM / DED / PARAMAN |
| City | State Zip Code | Secretarial Secretarial Productional |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period |
| Name of Employer | Occupation > | Landson to a section of the section |
| Receipt For: Primary General Other (specify) | Election Cycle-to-Date | |
| SUBTOTAL of Receipts This Page (optional) | | |
| TOTAL This Desired float many this line | or only | |

S

| SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 0 OF 13 (check only one) 17 | |
|--|---|--|--|
| Any information copied from such Reports and Statements mor for commercial purposes, other than using the name and | y person for the purpose of soliciting contributions | | |
| NAME OF COMMITTEE (In Full) FRIENDS OF MATT MATS | UNAGA - CONGRESS | | |
| Full Name (Last, First, Middle Initial) N | /A | Date of Disbursement | |
| Mailing Address | | | |
| City State | Zip Code | Amount of Each Disbursement this Period | |
| Purpose of Disbursement Candidate Name | | | |
| Office Sought: House Disbursement For Senate Primary , President Other (s | General | | |
| Full Name (Last, First, Middle Initial) | | | |
| Mailing Address | A | Date of Disbursement | |
| City State | Zip Code | | |
| Oily State | Zip Code | Amount of Each Disbursement this Period | |
| Purpose of Disbursement | = : | ************************************** | |
| Candidate Name | Catego Type | | |
| Office Sought: House Disbursement For Senate Primary Other (s | General | | |
| State: District: Full Name (Last, First, Middle Initial) | · | | |
| N/ | 'A | Date of Disbursement | |
| Mailing Address | | Fair Sall of Sall | |
| | ip Code | Amount of Each Disbursement this Period | |
| Purpose of Disbursement | | *** | |
| Candidate Name | Catego Type | | |
| Office Sought: House Disbursement For Senate Primary President Other (s | General | | |
| SUBTOTAL of Disbursements This Page (optional) | | | |
| TOTAL This Period (last page this line number only) | | | |

| SCHED | ULE | D | (FEC | Form | 3) |
|--------------|-----|---|-------|-------|----|
| DEBTS | AND | 0 | BLIGA | TIONS | } |

(Use separate schedule(s)

PAGE OF FOR LINE NUMBER:

| EBTS AND OBLIGATIONS cluding Loans | | | (check only one) | 9 X 10 |
|--|-------------|-----------------------|--|-------------|
| IAME OF COMMITTEE (In Full) | | | <u> </u> | 1110 |
| FRIENDS OF MATT MATSUNAGA - CONGRES | S | | | |
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor | | Nature of D | Pebt (Purpose): | |
| Verizon Hawaii Inc. | | Phone | | |
| Mailing Address P.O. Box 2200 | | Transact | ion ID: LS020120 | 0S8E58 |
| City State Zip Code Honolulu, Hawaii 96841 | | | | |
| Outstanding Balance Beginning This Period | | | | |
| 4 3 8 1 | | Outotandi | ing Balanca at Class of | Thin Dariad |
| Amount Incurred This Period Payment This Period | | Outstandi | ing Balance at Close of | and and and |
| 0 0 0 0 | 0.0 | | 4) malurature (| 3 8 1 |
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor | | Nature of D | Debt (Purpose): | |
| · Pacific Image Company | | Silk Scr | een T-Shirts | |
| Mailing Address 720 Laukapu Street | | Transact | ion ID: LS12232X | K1023E10 |
| City State Zip Code Hilo, Hawaii 96720- | | | • | |
| Outstanding Balance Beginning This Period | | | | |
| 5 4 0 6 3 E | | | | |
| Amount Incurred This Period Payment This Period | | Outstand | ing Balance at Close of | This Period |
| 0 0 0 0 in the second s | 0 0 | | <u> </u> | 0.6.3 |
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor | | Nature of D | Debt (Purpose): | |
| Pacific Image Company | | Shirts & | Banners | |
| Mailing Address 720 Laukapu Street | | | | |
| City State Zip Code 96720 | | Transact | ion ID: LS020320 | 0539E57 |
| Outstanding Balance Beginning This Period | | | | |
| 1 5 6 5 5 1 1 | | | | . _ |
| Amount Incurred This Period Payment This Period | السما | Outstand | ing Balance at Close of | This Period |
| O O O O O O O O O O O O O O O O O O O | 0.0 | L | 1, 5, 6 | 5 5 1 |
| 1) SUBTOTALS This Period This Page (optional) | • | | . 2 1 4 | 9.9.5 |
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| 2) TOTALS This Period (last page this line number only) | | leashnosh promptor | de sectione é scouperenderen é para- pares, para é scouperenderen é para- | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | > | | mand i mangaranganan, a mangarang mangaranganangananganang | 0 0 0 |
| 4) ADD 3) and 3) and carry forward to appropriate line of Summan, Dage (lest none) | - A-1-A | 5 | | 0 U UI |

SCHEDULE D (FEC Form 3) DE

PAGE OF (Use separate

| DEBTS AND OBLIGATIONS | edule(s) r each pered line) | (check only one) 9 | |
|--|-----------------------------------|-------------------------------|--|
| xcluding Loans NAME OF COMMITTEE (In Full) | 1 Home | ered iiie) | [^] 10 |
| FRIENDS OF MATT MATSUNAGA - CONGRES | SS | | |
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor | | Nature of D | ebt (Purpose): |
| NK Products, LLC. | | Signs | |
| Mailing Address 944 Akepo Lane | | Transact | ion ID: LS0201200S87E4S |
| City State Zip Code Honolulu, Hawaii 96817 | | Transact | 1011 1D. E30201200367E43 |
| Outstanding Balance Beginning This Period | | | |
| Amount Incurred This Period Payment This Period | | Outstandi | ng Balance at Close of This Period |
| to made to reduce the section of the | 0.0 | | , 4, 4, 9, 4, 1, 2 |
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor | | Nature of D | Pebt (Purpose): |
| · Digital Printers of HI | | Business | Cards; Stickers; Signs |
| Mailing Address 28 Pookela Street | | Transact | ion ID: LS020120037E54 |
| City State Zip Code Hilo, Hawaii 96720- | | 110110401 | |
| Outstanding Balance Beginning This Period | | | |
| 1 3 7 1 5 6 85 hours and another and an antique of antique of an antique | | | |
| Amount Incurred This Period Payment This Period | | Outstand | ing Balance at Close of This Period |
| 0.00 | 0.0 | | 3, 7, 1, 5, 6, 8 |
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor | | Nature of D | Pebt (Purpose): |
| Digital Printers of HI | | Brochu | res & Bulkmailing |
| Mailing Address 28 Pookela Street | | | |
| City State Zip Code Hilo, Hawaii 96720 | | Transact | ion ID: LS122320023E7 |
| Outstanding Balance Beginning This Period | | Transact | 101115.115.115.115.115.115.115.115.115.1 |
| 2.5.0.2.5.0.8 | | | |
| Amount Incurred This Period Payment This Period | | Outstand | ing Balance at Close of This Period |
| | 0.0 | - | , 25,0,2,5.0.8 |
| 1) SUBTOTALS This Period This Page (optional) | > | Service States | 3323488 |
| 2) TOTALS This Period (last page this line number only) | > | ئىرىسىلىسىدۇ چىروسىروسىروس | 0.00 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | > | - | , , , , , , 0 , 0, 0 |
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SCHEDULE D (FEC Form 3) D

PAGE 9 OF

| EBTS AND OBLIGATIONS coluding Loans | schedule(s) for each numbered line) | FOR LINE NUMBER: (check only one) 9 X 10 |
|--|---|--|
| IAME OF COMMITTEE (In Full) | | |
| FRIENDS OF MATT MATSUNAGA - CONGRESS | S | , , , , , , , , , , , , , , , , , , , |
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor | Nature of D | ebt (Purpose): |
| Digital Printers of HI | Business | Cards |
| Mailing Address 28 Pookela Street | _ | |
| City State Zip Code | Transacti | ion ID: LS1223002SE8 |
| Hilo, Hawaii 96720 | <u></u> | |
| Outstanding Balance Beginning This Period | | |
| No. 7 market I worker things of the Degree of a community of the Property of This Property | O | ng Bolongo at Class of This Besied |
| Amount Incurred This Period Payment This Period | | ng Balance at Close of This Period |
| 0.00 | 0.0 | , 2, 4, 7, 9, 2 |
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor | Nature of D | ebt (Purpose): |
| Pacific Image & Sign | Banners | & Stickers |
| Malling Address 720 Laukapu Street | | |
| City State Zip Code Hilo, Hawaii 96720- | Transacti | ion ID: LS122320023E9 |
| Outstanding Balance Beginning This Period 7 9 3 7 5 3 Amount Incurred This Period Payment This Period | Outstandi | ng Balance at Close of This Period |
| | 0.0 | 7,9,3.7.5.3 |
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor | Nature of D | ebt (Purpose): |
| Steve Okina | Media L | ayout |
| Mailing Address 94-1263 Lumikule Street, Unit 21B | | |
| City State Zip Code | | .' ID 1 000010000 |
| Waipahu, Hawaii 96797 | Iransaci | tion ID: LS020120037E50 |
| Outstanding Balance Beginning This Period | | |
| Amount Incurred This Period Payment This Period | Outotoodii | na Ralanca at Close of This Bosies |
| Leader and an effect frame frame framework makes referential and the second and t | mercan facilities. | ng Balance at Close of This Period |
| Description of market of the section | 0.01 | 1, 9, 8, 4, 1, 2 |
| 1) SUBTOTALS This Period This Page (optional) | | 1,0,1,6,9,5,7 |
| 2) TOTALS This Period (last page this line number only) | | , 0,0,0; |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | > | , 0 . 0 . 0 |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page of | nly) | 0 0 0 |

(Use separate schedule(s) for each numbered line) PAGE 10 OF 1

FOR LINE NUMBER: (check only one)

9 X 10

Excluding Loans

| AME OF COMMITTEE (In Full) FRIENDS OF MATT MATSUNAGA - CONGRESS | | | |
|---|---|--|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor | Nature of Debt (Purpose): | | |
| American Savings Bank | Maintenance Fee | | |
| Mailing Address 1001 Bishop Street | Transaction ID: LS71010.E163 | | |
| City State Zip Code Honolulu, Hawaii 96813 | Transaction ID. ES/TOTO.ET03 | | |
| Outstanding Balance Beginning This Period | | | |
| Amount Incurred This Period Payment This Period 5 6 7 | Outstanding Balance at Close of This Period | | |
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor | Nature of Debt (Purpose): | | |
| American Savings Bank | Maintenance Fee | | |
| Mailing Address 1001 Bishop Street City State Zip Code | Transaction ID: LS71010.E164 | | |
| Honolulu, Hawaii 96813- | | | |
| Outstanding Balance Beginning This Period , 0 0 0 | | | |
| Amount Incurred This Period Payment This Period 7.0 0 1 0 0 0 0 0 0 0 0 | Outstanding Balance at Close of This Period 7 0 0 | | |
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor | Nature of Debt (Purpose): | | |
| American Savings Bank | Maintenance Fee | | |
| Mailing Address 1001 Bishop Street | | | |
| City State Zip Code Honolulu, Hawaii 96813 | Transaction ID: LS71010.E165 | | |
| Outstanding Balance Beginning This Period | | | |
| Amount Incurred This Period Payment This Period 7.00 | Outstanding Balance at Close of This Period | | |
| Amount Incurred This Period Payment This Period | | | |
| Amount Incurred This Period Payment This Period 7.00 , 0.00 , 0.00 | 7.0 0 | | |
| Amount Incurred This Period Payment This Period 7.00 SUBTOTALS This Period This Page (optional) | 7.00 | | |

(Use separate schedule(s) for each numbered line) PAGE 11 OF 13

9

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| FOR L | NE 1 | NUMBER |
|--------|------|--------|
| (check | only | one) |

Excluding Loans

NAME OF COMMITTEE (In Full)

| FRIENDS OF MATT MATSUNAGA - CONGRESS | | |
|--|---|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor | Nature of Debt (Purpose): | |
| Elizabeth Lum | Printing; Labels; Aristotle | |
| Malling Address 3835 Kumu Street | Transaction ID: LS0201200S37E41 | |
| City State Zip Code Honolulu, Hawaii 96822 | 1.miomosion 15. 1502012005371541 | |
| Outstanding Balance Beginning This Period | | |
| 2,50000 Amount Incurred This Period Payment This Period | Outstanding Balance at Close of This Period | |
| 0.0.0 | 2,5,0,0.0.0 | |
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor | Nature of Debt (Purpose): | |
| ' OmniTrak Group Inc. | Polls | |
| Mailing Address 841 Bishop Street, Suite 1150 | Transaction ID: LS020120037E47 | |
| City State Zip Code Honolulu, Hawaii 96813 | Transaction ID. LSUZUIZUU3/E4/ | |
| Outstanding Balance Beginning This Period | • . | |
| 26,320,67 | | |
| Amount Incurred This Period Payment This Period 0 0 0 | Outstanding Balance at Close of This Period | |
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor | Nature of Debt (Purpose): | |
| LaFave & Associates | Political Fundraising | |
| Mailing Address 6282 Occoquan Forest Drive | | |
| City State Zip Code Manassas, VA 20112 | Transaction ID: LS0201200S7E48 | |
| Outstanding Balance Beginning This Period | | |
| 3 5 0 0 0 0 | 0.444-11-21-11-11-11-11-11-11-11-11-11-11-11- | |
| Amount Incurred This Period Payment This Period | Outstanding Balance at Close of This Period | |
| 0.0.0 | 3,500.0.00 | |
| SUBTOTALS This Period This Page (optional) | 3.2,3.2.0.6.7 | |
| TOTALS This Period (last page this line number only) | 0.00 | |
| TOTAL OUTSTANDING LOANS from Schedule C (last page only) | 0.0.0 | |
| ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | 0.00 | |

(Use separate schedule(s) for each numbered line)

PAGE 12 OF FOR LINE NUMBER:

| LOU FIRE MOMPEU | $\overline{}$ | |
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| (check only one) | Ш | 9 |
| | X | 10 |
| | | |

| Excluding Loans | numbered line) | X |
|--------------------------------------|----------------|---|
| NAME OF COMMITTEE (In Full) | | |
| FRIENDS OF MATT MATSUNAGA - CONGRESS | | |

| AME OF COMMITTEE (In Full) EDIENIDS OF MATT MATSUNAGA CONCRESS | |
|--|---|
| FRIENDS OF MATT MATSUNAGA - CONGRESS | I Notice of Daht /Dimessale |
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor | Nature of Debt (Purpose): |
| Joan Bennet & Associates, Inc. | Media Production |
| Mailing Address 3300-A Pacific Heights Road | Transaction ID: LS0201200S7E49 |
| City State Zip Code Honolulu, Hawaii 96813 | Transaction ib. Doctor2005/L47 |
| Outstanding Balance Beginning This Period | |
| 1.7,4,1,6.7.5 | |
| Amount Incurred This Period Payment This Period | Outstanding Balance at Close of This Period |
| 0.0.0 | 1.7,4,1,6,7,5 |
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor | Nature of Debt (Purpose): |
| ' QMark | Custom Packaging of Data |
| Mailing Address 1001 Bishop Street, American Savings Twr, Flr. 19 | Transaction ID: LS020120037E51 |
| City State Zip Code Honolulu, Hawaii 96813 | Transaction ID: LSU2012003/E31 |
| Outstanding Balance Beginning This Period | |
| 1 0 4 1 6 0 | |
| Amount Incurred This Period Payment This Period | Outstanding Balance at Close of This Period |
| 0.0.0 | 1,0,4,1,6,0 |
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor | Nature of Debt (Purpose): |
| Harry Onouye | Supplies for Hilo Campaign Head- |
| Mailing Address 25 Lueini Street | quarters |
| City State Zip Code Hilo, Hawaii 96720 | Transaction ID: LS020120057E52 |
| Outstanding Balance Beginning This Period | |
| 1,0,7,3,5,8 | |
| Amount Incurred This Period Payment This Period | Outstanding Balance at Close of This Period |
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| SUBTOTALS This Period This Page (optional) | 1.9.5.3.1.9.3 |
| TOTALS This Period (last page this line number only) | 0.00 |
|) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | ,0.0.0 |
| ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | 0.00 |

(Use separate schedule(s) for each numbered line) PAGE 13 OF 13

FOR LINE NUMBER: (check only one)

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| FRIENDS OF MATT MATSUNAGA - CONGRESS | |
|--|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor | Nature of Debt (Purpose): |
| A1 Inoue | Supplies and Entertainment for |
| Mailing Address 101 Aupuni Street, Suite 1001 | Rally |
| City State Zip Code Hilo, Hawaii 96720 | Transaction ID: LS0201200S7E53 |
| Outstanding Balance Beginning This Period 1,4 8 3,3 2 Amount Incurred This Period Payment This Period | Outstanding Balance at Close of This Period |
| Amount Incurred This Period Payment This Period 0, 0, 0 | 1,4 8 3.3 2 |
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor | Nature of Debt (Purpose): |
| Mailing Address | |
| City State Zip Code | - |
| Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period | |
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor | Nature of Debt (Purpose): |
| Mailing Address | - |
| City State Zip Code | |
| Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period | Outstanding Balance at Close of This Period |
| 1) SUBTOTALS This Period This Page (optional) | 1,48332 |
| 2) TOTALS This Period (last page this line number only) | 9.8.9.0.9.9.7 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | 0 0 0' |



Honolulu, Hawaii 96813 (MMM) Topa Financial Center 745 Fort Street, Suite 1500

FEO MAN CE

2022 NOV -4 PK 12: 16

999 E Street, NW **Federal Election Committee** Washington, DC 20463



| 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. | | | |
|---|-------------------------------|--|--|
| Hand Delivered | Date of Receipt | | |
| USPS First Class Mail Postmarked NA | Date of Receipt /// 04/2022 | | |
| USPS Registered/Certified | Postmarked (R/C) | | |
| USPS Priority Mail | Postmarked , | | |
| USPS Priority Mail Express | Postmarked | | |
| Postmark Illegible | | | |
| No Postmark | | | |
| Overnight Delivery Service (Specify): | Shipping Date | | |
| Next | Business Day Delivery | | |
| Received from House Records & Registration Offi | Date of Receipt ice | | |
| Received from Senate Public Records Office | Date of Receipt | | |
| Received from Electronic Filing, Office | Date of Receipt | | |
| Other (Specify): | Pate of Receipt or Postmarked | | |
| PREPARER | 11/04/2022 DATE PREPARED | | |
| (3/2015) | | | |