

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

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"/> 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)

BANK OF HAWAII CORPORATION SPECIAL POLITICAL EDUCATION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Democratic Party of Hawaii

Mailing Address 1314 South King Street #G4

City Honolulu State HI Zip Code 96814

Purpose of Disbursement

012

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 19 / 2018

FEC Identification Number

C C00212787

Transaction ID : SB23.8818

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DOUG CHIN FOR HAWAII

Mailing Address PO BOX 2018

City HONOLULU State HI Zip Code 96805

Purpose of Disbursement

012

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: HI District: 01

Date of Disbursement

MM / DD / YYYY
02 / 22 / 2018

FEC Identification Number

C C00663591

Transaction ID : SB23.8823

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. KIM, DONNA MERCADO, , ,

Mailing Address PO BOX 2493

City HONOLULU State HI Zip Code 96804

Purpose of Disbursement

012

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: HI District: 01

Date of Disbursement

MM / DD / YYYY
02 / 23 / 2018

FEC Identification Number

C H4HI01167

Transaction ID : SB23.8821

Amount of Each Disbursement this Period

1000.00

Memo Item

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

3500.00

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

3500.00