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FEC FORM 1

STATEMENT OF ORGANIZATION





14 JUL - 1 PM 2: 12

FEC FORM 1

(Revised 06/2012)

	<u>.</u>		No distance and the second	Office Use Only
	AME OF OMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5
AR	TURD PAC	HECO REYES	FOR 4.5.5	ENATOR (NP)
		<u> </u>		
ADDR	ESS (number and street)	194-1432 K	AHULI STRE	ET NAIPAHY HE
	(Check if address is changed)			
	is changed)	WAIPAHA	<u>- </u>	111 TI 191 TO 11 14 20 7
		CITY A		#I 96791 - #327 STATE ▲ ZIP CODE ▲
COMM	NTTEE'S E-MAIL ADDRI	ess outrus		
:	(Check if address	MACO	okeyahoo.c	zom
	is changed)			
		Optional Second E-Mail Addr	ress	
			<u> </u>	
COMM	ITTEE'S WEB PAGE AD	DRESS (LIBL)		
	(Check if address is changed)	· · · · · · · · · · · · · · · · · · ·	A FAATRANK	0.044
	is changed)	ART Reyes	Y A SENDIUM,	4029
				
2. DA	TE OC T	9 2614		
3. FE	C IDENTIFICATION NU		erecognoscology consequences co	
4. IS	THIS STATEMENT	NEW (N) OR	AMENDED (A)	
l certify	that I have examined th	is Statement and to the best of	my knowledge and belief it is	s true, correct and complete
	Print Name of Treasurer		Ensegn RA	MON P. REYES
Signatur	re of Treasurer	a Ramon (P. Keyn	Date 1/9 06 2014
NOTE: S	submission of false, errone	ous, or incomplete information ma ANY CHANGE IN INFORMATION	y subject the person signing thi SHOULD BE REPORTED WIT	is Statement to the penalties of 2 U.S.C. §437g.

For further information contact:

Federal Election Commission Toll Free 800-424-9530

Local 202-694-1100

14020440898

Office

Use

Only

FEC	Form 1 (Revised 02/2009)					Page 2
	F COMMITTEE					
(a)	This committee is a pri	ncipal campaign co	ommittee. (Co	mplete the candidate in	formation below	v.)
(b)	This committee is an a information below.)	uthorized committe	e, and is NO	Γ a principal campaign	committee. (Co	mplete the candidate
Name of Candidate	ARTHAD	PACHE	CO RE	YES		
Candidate Party Affi	- 7/ //	Office Sought:	House	Senate	President	State $\mathcal{H}\mathcal{I}^-$
(c)	This committee support	s/opposes only on	e candidate, a	and is NOT an authorize	ed committee.	
Name of Candidate	e <u> </u>		1 1 1			
Party C	committee:					
(d)	This committee is a		National, State r subordinate)	e committee of the		(Democratic, Republican, etc.) Party.
Politica	 I Action Committee (PA	AC): (A	VONE)		
(e)	This committee is a seg		•		on line 6.) Its co	onnected organization is a:
	Corporation		Corp	oration w/o Capital Stoo	ck	Labor Organization
	Membership Or	ganization	Trade	Association		Cooperative
	In addition	on, this committee i	s a Lobbyist/R	egistrant PAC.		
(f)	This committee support committee. (i.e., noncon	s/opposes more th nected committee)	an one Feder	al candidate, and is NC	T a separate s	segregated fund or party
	In addition, this c	ommittee is a Lobb	yist/Registrani	PAC.		
	In addition, this c	ommittee is a Lead	ership PAC. (I	dentify sponsor on line 6	i.)	
Joint Fu	ndraising Representati	ve:	NON	<i>s)</i>		
(g)	This committee collects of committees/organizations	ontributions, pays f s. at least one of wh	undraising exp	penses and disburses ne prized committee of a fed	t proceeds for t deral candidate.	wo or more political
(h)	This committee collects or committees/organizations	ontributions, pays for none of which is a	undraising exp in authorized (enses and disburses ne committee of a federal ca	t proceeds for to andidate.	vo or more political
Co	emmittees Participating in	Joint Fundraiser	•			
1.	W/A	_		FEC ID num	ber ; 🕻 🖟	
2.				FEC ID num		en gyez megyzás, n
3.				FEC ID num	ber C	mater =:
4.				FEC ID numi	ber C	****
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6. Name of Any Connected							
NONE		1 1 1 1 1 1					
Mailing Address	MA						
				1 , 1			
	<u> </u>	CITY		STATE	ZIP CO	DE	
Relationship: Connecte	ed Organization	Affiliated Committee	Joint Fundraisir	ng Representat	tive Leadership	PAC Sponsor	
 Custodian of Records: Idea books and records. 	ntify by name, addr	ress (phone number -	- optional) and pos	ition of the pe	erson in possession	of committee	
	TURD PA	CHECO R	'eyer				
Full Name	1432 KI	HULT S	TREET OF	<u>'.</u>			
Mailing Address	94-143	2 KAHU	41 STC	267			
		<u> </u>	1 1 1 4 4 1				
	WAIPA	44	1111	HA	96797	4327	
Title or Position		CITY		STATE	ZIP COE	ÞΕ	
CANDIDOTE	11111		Telephone nu	mber			
Treasurer: List the name an any designated agent (e.g., a	d address (phone n assistant treasurer).	umber optional) of	the treasurer of the	e committee; a	and the name and a	ddress of	
Full Name of Treasurer	ON PACH	1500 RE)	/ = \$		<u> </u>	1 1	
Mailing Address	0/094	2-1432 P	KAHULI,	87RE	F67		
				1111	<u>i </u>		
	WATPAR	CITY		STATE	96797-		
Title or Position	f		Telephone nun		81-1489-1	•	
	<u>, , , , , , , , , , , , , , , , , , , </u>		reichmaile unu	nuer [O]	m thaiti.	-1010	

Full Name of Designated Agent Mailing Address Mailing Address CITY STATE ZIP CODE Title or Position Telephone number Telephone number CITY STATE ZIP CODE Total phone number CITY STATE ZIP CODE Total phone number CITY STATE ZIP CODE Name of Bank, Depository, etc. CITY STATE ZIP CODE Name of Bank, Depository, etc.	FEC Fo rr	1 (Revised 02/2009)		Page 4
CITY STATE ZIP CODE Title or Position Telephone number Telephon	Designated	NONE		
CITY STATE ZIP CODE Title or Position Telephone number Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds. holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc. CITY STATE ZIP CODE Name of Bank, Depository, etc. Mailing Address Mailing Address	Mailing Address	[N/A		
Title or Position Telephone number Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds. holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc. CITY STATE ZIP CODE Name of Bank, Depository, etc. Mailing Address Mailing Address Mailing Address			<u>. L . L . L . L . L . L . L . L . L . L</u>	
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds. holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc. Mailing Address CITY STATE ZIP CODE Mailing Address Mailing Address			STATE	ZIP CODE
Safety deposit boxes or maintains funds. Name of Bank, Depository, etc. Mailing Address City State ZIP CODE Name of Bank, Depository, etc. Mailing Address Mailing Address	Title or Position	Telephone num	ber NA-L	
Mailing Address CITY STATE ZIP CODE Name of Bank, Depository, etc. Mailing Address Mailing Address	safety deposit bo	xes or maintains funds.	e deposits funds. holds	s accounts, rents
CITY STATE ZIP CODE Name of Bank, Depository, etc. Mailing Address		NONE	11111	<u> </u>
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CITY STATE ZIP CODE Name of Bank, Depository, etc. Mailing Address				
Name of Bank, Depository, etc. Mailing Address Mailing Address				
Mailing Address Mailing Address		CITY	STATE	ZIP CODE
Mailing Address	Name of Bank, I	Pepository, etc.		
		NONE		<u> </u>
	Mailing Address	NA		<u> </u>
CITY STATE ZIP CODE			1111	
CITY STATE ZIP CODE				
		CITY	STATE	ZIP CODE

ARTURO P. DEVES
FOR U.S. SENATE CAPS
9.4-1/3-2 KAHULI ST.,
WAIP AHU HI U.S.A. 9674

Senace Post Office

RECORFTARY & DR SENATE
RECOM # 232
HART SENATE OFFICE 8669.
U. S. SENATE,
WASHINGTON DR 20510

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NANCY ERICKSON SECRETARY.

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PREPARER

DANA K MECALLUM SUFERINTENDENT

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United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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