Only

PAGE 1 / 4

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) FIRST HAWAIIAN BANK CITIZENSHIP COMMITTEE 999 BISHOP STREET ADDRESS (number and street) (Check if address is changed) **HONOLULU** 96813 HI CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS changai@fhb.com (Check if address X is changed) Optional Second E-Mail Address cnekota@fhb.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2017 C00451781 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Hangai, Calvin, , , Type or Print Name of Treasurer Hangai, Calvin,,, [Electronically Filed] 80 17 2017 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

FEC Form	<b>1</b> (Revised 02/2009)	Page <b>2</b>
TYPE OF COM		
(a) T	his committee is a principal campaign committee. (Complete the candidate information below.	
	his committee is an authorized committee, and is NOT a principal campaign committee. (Comformation below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliation	Office Sought: House Senate President	State
(c) T	his committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Comm	ittee:  (National, State	(Democratic,
(d) T	his committee is a or subordinate) committee of the	Republican, etc.) Party
Political Acti	on Committee (PAC):	
(e) <b>x</b> T	his committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nnected organization is
	Corporation Corporation w/o Capital Stock	Labor Organization
[	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
	his committee supports/opposes more than one Federal candidate, and is NOT a separate sommittee. (i.e., nonconnected committee)	egregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
[	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fundrai	sing Representative:	
_	is committee collects contributions, pays fundraising expenses and disburses net proceeds for to	vo or more political
CC	ommittees/organizations, at least one of which is an authorized committee of a federal candidate.	
	is committee collects contributions, pays fundraising expenses and disburses net proceeds for to emmittees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
Commit	tees Participating in Joint Fundraiser	
1	FEC ID number	
2	FEC ID number	
3		
4.		

_		-
FEC Form 1 (Revised	02/2009)	Page <b>3</b>
Write or Type Committee Nam		3
FIRST HAWAII	AN BANK CITIZENSHIP COMMITTEE	
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Lea	adership PAC Sponsor
FIRST HAWAIIAN BA	NK CITIZENSHIP COMMITTEE	
Mailing Address	999 BISHOP STREET	
		<u>                                     </u>
	CITY STATE	ZIP CODE
Relationship: Connecte	ed Organization 🗶 Affiliated Committee 📗 Joint Fundraising Representative	Leadership PAC Sponsor
<ol> <li>Custodian of Records: Ide books and records.</li> </ol>	ntify by name, address (phone number optional) and position of the person i	in possession of committee
Hangai, C Full Name	alvin, , ,	
Mailing Address	999 Bishop Street	
	Honolulu HI 968	813
Title or Position	CITY STATE	ZIP CODE
SVP & Controller	Telephone number 808	-   844   -   3703
8. <b>Treasurer:</b> List the name ar any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the assistant treasurer).	ne name and address of
Full Name Hangai, C	alvin, , ,	
Mailing Address	999 Bishop Street	
	Honolulu	
Title or Position	CITY STATE	ZIP CODE   844   3703

Telephone number

	<b>n 1</b> (Revised 02/2009)	Page <b>4</b>
Full Name of Designated Agent	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
-	oxes or maintains funds.	
Name of Bank, I	FIRST HAWAIIAN BANK	
Name of Bank, I		
	FIRST HAWAIIAN BANK	
	FIRST HAWAIIAN BANK  999 Bishop Street  Honolulu  HI  96813	ZIP CODE
	FIRST HAWAIIAN BANK  999 Bishop Street  Honolulu  HI  96813	ZIP CODE
Mailing Address	FIRST HAWAIIAN BANK  999 Bishop Street  Honolulu  HI  96813	
Mailing Address	FIRST HAWAIIAN BANK  999 Bishop Street  Honolulu  HI  96813  CITY  STATE	
Mailing Address  Name of Bank, I	FIRST HAWAIIAN BANK  999 Bishop Street  Honolulu  HI  96813  CITY  STATE	
Mailing Address  Name of Bank, I	FIRST HAWAIIAN BANK  999 Bishop Street  Honolulu  HI  96813  CITY  STATE	