

FEDERAL ELECTION COMMISSION
OCT 28 10 12 AM '99

RICHARD J. SAKODA, ESQ.
820 Mililani Street, Suite 503, Honolulu, HI 96813
Phone: (808) 545-5454 - Fax: (808) 528-1818

October 27, 1999

VIA FACSIMILE, 202-219-3923

John R. Velasquez, Jr.
Acting Central Enforcement Docket Supervisor
Federal Election Commission
Washington, DC 20463

Re: Friedheim for Senate; MUR 4927

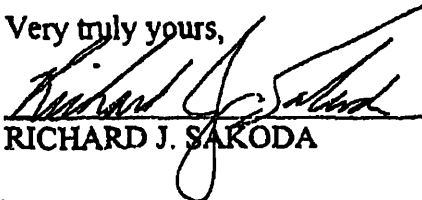
Dear Mr. Velasquez:

I am responding on behalf of Jason Craig Shapiro, the Treasurer for Friedheim for Senate. I have previously sent you authorization to speak for him in this matter. We have received and reviewed the Complaint which forms the basis of the MUR 4927. Our response to the Complaint is the attached three reports, October Quarterly Report, Year End Report, and Mid Year Report. These reports bring us up to date with the filing requirements, to the best of our knowledge.

Due to inexperience with these matters, the campaign failed to timely file its reports. Arrangements have been made to make sure that future reports go out in a timely fashion. We deeply regret any inconvenience this has caused to you or your staff for having to monitor this matter. Please let us know if there is anything else that we can do, or need to do, to further set this matter straight.

We are sending copies of this letter and the reports to Lisa Simpson of the Federal Election Commission. The originals of these documents are being placed in the mail today as it is our understanding today is the deadline for filing. We are merely sending the fax to show you that we have completed the materials and have them on the way in the mail. We just received the notification regarding the extension yesterday, and that gave us today as the deadline. Thank you in advance for your courtesy and cooperation in this matter.

Very truly yours,


RICHARD J. SAKODA

Enclosure

cc: Lisa Simpson, via fax, 202-219-0174

457

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Friedheim for Senate		2. FEC IDENTIFICATION NUMBER C00 340059
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. P.O. Box 128		
CITY, STATE and ZIP CODE Honolulu, Hawaii 96813	STATE/DISTRICT	3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

4. TYPE OF REPORT

- April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid-Year Report (Non-election Year Only)
- 12-Day Pre-Election Report for the _____ (Type of Election) election on _____ in the State of _____
- 30-Day Post-Election Report following the General Election on _____ in the State of _____
- Termination Report

This report contains activity for Primary Election General Election Special Election Runoff Election

SUMMARY

5. Covering Period 9/2/98 through 10/15/98	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	32,885.00	35,885.00
(b) Total Contribution Refunds (from Line 20(d))	0	0
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	32,885.00	35,885.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	32,593.30	34,623.46
(b) Total Offsets to Operating Expenditures (from Line 14)	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	32,593.30	34,623.46
8. Cash on Hand at Close of Reporting Period (from Line 27)	12,615.54	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

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 Jason Shapiro	
Signature of Treasurer <i>J. Shapiro</i>	Date 10/27/99

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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DETAILED SUMMARY PAGE
of Receipts and Disbursements
(Page 2, FEC FORM 3)

259

Name of Committee (in full)	Report Covering the Period:	
	From	To
I. RECEIPTS	COLUMN A	COLUMN B
	Total This Period	Calendar Year-To-Date
11 CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	9385.00	
(ii) Unitemized	0	
(iii) Total of contributions from individuals	9385.00	11385.00
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs)	0	0
(d) The Candidate	23500.00	24500.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	32885.00	35885.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0	0
13 LOANS:		
(a) Made or Guaranteed by the Candidate	0	0
(b) All Other Loans	0	0
(c) TOTAL LOANS (add 13(a) and (b))		
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0	0
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0	0
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	32885.00	35885.00
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	32593.30	34623.46
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))		
21. OTHER DISBURSEMENTS		
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	32593.30	34623.46

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$ 969.84	
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$ 32885.00	
25. SUBTOTAL (add Line 23 and Line 24)	\$ 33854.84	
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	\$ 32593.30	
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	\$ 1261.54	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE <u>2</u> OF
	FOR LINE NUMBER

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full) Friedheim for Senate

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<u>Jay Friedheim</u> <u>1145 Kaloana Pkwy</u> <u>Kailua Hawaii 96734</u>	<u>Admiralty</u> <u>Advocates</u>	<u>9/3/98</u>	<u>2000.00</u>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <u>Lawyer</u>	Aggregate Year-to-Date <u>> \$ 9,000.00</u>	
<u>Gregory Kafoury</u> <u>320 S.W. Stark St.</u> <u>Portland Oregon 97204</u>	<u>Gregory Kafoury</u>	<u>9/14/98</u>	<u>1000.00</u>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <u>Lawyer</u>	Aggregate Year-to-Date <u>> \$ 1000.00</u>	
<u>David Goldman</u> <u>4510 Kipling Circle</u> <u>Sarasota Fla. 34241</u>	<u>David Goldman</u>	<u>9/14/98</u>	<u>1000.00</u>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <u>Lawyer</u>	Aggregate Year-to-Date <u>> \$ 1200.00</u>	
<u>John Gibson</u> <u>2035 10th AVE</u> <u>Honolulu, Hawaii 96816</u>	<u>John Gibson</u>	<u>9/14/98</u>	<u>1000.00</u>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <u>Lawyer</u>	Aggregate Year-to-Date <u>> \$ 1000.00</u>	
<u>Mark Mc Dougall</u> <u>678 Hazelton Dr</u> <u>Madison Mississippi 39110</u>	<u>Mark Mc Dougall</u>	<u>9/14/98</u>	<u>1000.00</u>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <u>Lawyer</u>	Aggregate Year-to-Date <u>> \$ 1000.00</u>	
<u>Karen Mc Dougall</u> <u>678 Hazelton Dr.</u> <u>Madison Mississippi 39110</u>	<u>Homemaker</u>	<u>9/14/98</u>	<u>1000.00</u>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <u>Homemaker</u>	Aggregate Year-to-Date <u>> \$ 1000.00</u>	
<u>Ken B. Marcus</u> <u>403 Wanaao Rd</u> <u>Kailua HI 96734</u>	<u>Ken B. Marcus</u>	<u>9/14/98</u>	<u>100.00</u>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <u>Lawyer</u>	Aggregate Year-to-Date <u>> \$ 100.00</u>	

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SUBTOTAL of Receipts This Page (optional)	<u>7100.00</u>
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 3 OF 1 FOR LINE NUMBER

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full) Friedheim for Senate

A. Full Name, Mailing Address and ZIP Code Jay Friedheim 145 Kaiolenn Dr. Kailua Hg 96734	Name of Employer Jay L Friedheim	Date (month, day, year) 9/16/98	Amount of Each Receipt this Period 10,000.00
	Occupation Lawyer	Aggregate Year-to-Date > \$ 19,000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

B. Full Name, Mailing Address and ZIP Code Quentin H. Tahara 1028 Matzie Ln Honolulu Hawaii 96817	Name of Employer McCabe, Hamilton	Date (month, day, year) 9/16/98	Amount of Each Receipt this Period 1000.00
	Occupation Stevardore	Aggregate Year-to-Date > \$ 1000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

C. Full Name, Mailing Address and ZIP Code Jay L. Friedheim 145 Kaiolenn Dr. Kailua Hawaii 96734	Name of Employer Jay Friedheim	Date (month, day, year) 9/30/98	Amount of Each Receipt this Period 2000.00
	Occupation Lawyer	Aggregate Year-to-Date > \$ 21,000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

D. Full Name, Mailing Address and ZIP Code Jay L. Friedheim 145 Kaiolenn Dr. Kailua Hawaii 96734	Name of Employer Jay Friedheim	Date (month, day, year) 9/16/98	Amount of Each Receipt this Period 2500.00
	Occupation	Aggregate Year-to-Date > \$ 23,500.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

E. Full Name, Mailing Address and ZIP Code Lunsford D. Phillips 900 East Street Mall Honolulu Hawaii 96813	Name of Employer Lunsford R. Phillips	Date (month, day, year) 10/13/98	Amount of Each Receipt this Period 885.00
	Occupation Lawyer	Aggregate Year-to-Date > \$ 885.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

F. Full Name, Mailing Address and ZIP Code Michael Hirai 841 Bishop Street #2030 Honolulu, HI 96813	Name of Employer H.C.M. Capitol Management	Date (month, day, year) 9/11/98	Amount of Each Receipt this Period 100.00
	Occupation Business Man	Aggregate Year-to-Date > \$ 100.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)	16,485.00
TOTAL This Period (last page this line number only)	32,885.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 4
	FOR LINE NUMBER

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NAME OF COMMITTEE (in Full) **Friedheim for Senate**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hawaii Newspaper Assoc - 605 Kapiolani Blvd Hon HI: 96813	Ads/media Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/3/98	1465.28
Signature Graphics 3360 Wiley Post Rd Suite D, Carlton TX 75006	Campaign Shirts Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/4/98	523.30
Signature Graphics 3360 Wiley Post Rd Suite D, Carlton TX 75006	tee Shirts Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/4/98	932.60
fast Signs 1130 W. Nimitz Hwy A-10 Honolulu HI: 96817	Signs Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/4/98	268.76
Hawaii Newspaper Agency 605 Kapiolani Blvd Hon HI: 96813	media Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/8/98	5196.15
Bowles Advertising 2251 Roundtop Dr. Honolulu HI: 96822	Ads media Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/10/98	296.40
Costco Wholesale 4389 Lawehana St Honolulu HI: 96818	Envelopes & labels Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/14/98	175.15
Bowles Advertising 2251 Roundtop Dr. Honolulu HI: 96822	Ads/media Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/15/98	3588.45
US Postmaster Honolulu HI 96820	Stamps Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/15/98	900.00

SUBTOTAL of Disbursements This Page (optional)	13,346.09
TOTAL This Period (last page this line number only)	

11763

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 2 OF 4
	FOR LINE NUMBER

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NAME OF COMMITTEE (In Full) **Friedheim for Senate**

264

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
US Postmaster Honolulu HI 96820	Stamps Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/15/98	383.90
New Planet Radio KRTR - 970 N. Kalanien Kailua 96734 #1107	Media Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/16/98	1451.99
KSSK Radio 1505 Billingham Blvd Honolulu HI 96817	Media Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/16/98	1221.81
KSSK Radio 1505 Billingham Blvd Honolulu HI 96817	Media Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/16/98	212.48
Kilgo Hardware 180 Sand Island Access Rd Hon. HI 96819	Sign Posts Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/16/98	56.63
Hawaii Newspaper Agency 605 Kapiolani Blvd Hon. HI 96813	Ads/Media Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/16/98	2460.42
Audiomedia 1232 C. Waimanua St Hon. HI 96814	Media/C.D. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/16/98	85.28
KCCN Radio 900 Fort St. Mall #1400 Honolulu HI 96813	Media Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/16/98	3196.10
Kumu Radio 765 Amana St. Hon HI 96734 #206	Media Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/16/98	1285.54

SUBTOTAL of Disbursements This Page (optional)	10356.14
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 3 OF 4
FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)			
Friedheim for Senate			
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hawaii Newspaper Agency 605 Kapiolani Blvd Honolulu Hawaii 96813	Ads Media Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/17/99	820.08
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bowles Advertising - 2251 Roundtop Drive Honolulu Hawaii 96822	Artwork media Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/17/99	300.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bowles Advertising 2251 Roundtop Drive Honolulu Hi 96822	Media Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/15/99	564.74
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bowles Advertising 2251 Roundtop Drive Honolulu Hi 96822	media Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/8/99	500.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bowles Advertising 2251 Roundtop Drive Honolulu Hi 96822	media Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/22/99	500.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Federal Express 129 Pohakulana Place Honolulu Hi 96819	Shipping Shirts Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/22/98	263.75
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hon. News. Agency 605 Kapiolani Blvd Honolulu Hi 96813	Media / Ads Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/23/98	1782.78
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hon. News. Agency 605 Kapiolani Blvd Hon. Hi 96813	Media / Ads Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/6/98	2377.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hon News. Agency 605 Kapiolani Blvd Hon. Hi 96813	Media / Ads Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/15/98	1782.72
SUBTOTAL of Disbursements This Page (optional)			8891.07
TOTAL This Period (last page this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 4 OF 11 FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

Friedheim for Senate

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
City Bank 201 Merchant St Honolulu 96813	Bank Service Charge Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/30/98	2.75
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

2.75

TOTAL This Period (last page this line number only)

32596.05

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Friedheim for Senate		2. FEC IDENTIFICATION NUMBER C0034059
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. P.O. Box 128		3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
CITY, STATE and ZIP CODE Honolulu HI 96813	STATE/DISTRICT	

4. TYPE OF REPORT

- April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid-Year Report (Non-election Year Only)
- 12-Day Pre-Election Report for the _____ (Type of Election) election on _____ in the State of _____
- 30-Day Post-Election Report following the General Election on _____ in the State of _____
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This report contains activity for Primary Election General Election Special Election Runoff Election

SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
10/16/98 through 1/31/99		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	0	35885.00
(b) Total Contribution Refunds (from Line 20(d))	0	0
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	0	35885.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	715.75	35339.21
(b) Total Offsets to Operating Expenditures (from Line 14)	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	715.75	35339.21
8. Cash on Hand at Close of Reporting Period (from Line 27)	545.79	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

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 Jason Shapiro	Date 10/27/99
Signature of Treasurer <i>Jason Shapiro</i>	

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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DETAILED SUMMARY PAGE

of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (in full) Friedheim For Senate Report Covering the Period: From: 10/6/99 To: 1/31/99

268

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) -----	0	
(ii) Unitemized -----	0	
(iii) Total of contributions from Individuals -----	0	11385.00
(b) Political Party Committees -----	0	0
(c) Other Political Committees (such as PACs) -----	0	0
(d) The Candidate -----	0	24,500.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d)) -----	0	35,885.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES -----	0	
13. LOANS:		
(a) Made or Guaranteed by the Candidate -----	0	
(b) All Other Loans -----	0	
(c) TOTAL LOANS (add 13(a) and (b)) -----	0	
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) -----	0	
15. OTHER RECEIPTS (Dividends, Interest, etc.) -----	0	
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) -----	0	35,885.00
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES -----	715.75	35,339.21
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES -----	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate -----	0	0
(b) Of All Other Loans -----	0	0
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) -----	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees -----	0	0
(b) Political Party Committees -----	0	0
(c) Other Political Committees (such as PACs) -----	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) -----	0	0
21. OTHER DISBURSEMENTS -----	0	0
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) -----	715.75	35,339.21

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD -----	\$ 12,615.54
24. TOTAL RECEIPTS THIS PERIOD (from Line 16) -----	\$ 0
25. SUBTOTAL (add Line 23 and Line 24) -----	\$ 12,615.54
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) -----	\$ 715.75
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) -----	\$ 5,455.79

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 1
FOR LINE NUMBER

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Friedheim for Senate

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Honolulu Newspaper Agency 605 Kapiolani Blvd Honolulu Hawaii 96813	media/Ads Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/7/98	18.12
CityBank / Election fee 201 Merchant Honolulu HI 96813	Filing Charge Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/15/98	207.00
U.S. Post Office Honolulu, HI 96820	P.O. Box Charge Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/25/99	82.50
CityBank 201 Merchant St. Honolulu HI 96813	Bank Service Charge Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/31/98	2.77
CityBank 201 Merchant Honolulu, HI 96813	Bank Service Charge Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/30/98	4.14
CityBank 201 Merchant Honolulu HI 96813	Bank Service Charge Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	4.41
CityBank 201 Merchant Honolulu HI 96813	Bank Service Charge Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/31/99	4.43
Honolulu Newspaper Agency 605 Kapiolani Blvd Honolulu Hawaii 96813	media/Ads Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/98	297.13
CityBank 201 Merchant St. Honolulu HI 96813	Check Printing Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/29/99	95.75

SUBTOTAL of Disbursements This Page (optional)

715.75

TOTAL This Period (last page this line number only)

715.75

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Friedheim For Senate		2. FEC IDENTIFICATION NUMBER C00340059
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. P.O. Box 128		3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
CITY, STATE and ZIP CODE Honolulu HI 96813	STATE/DISTRICT	

4. TYPE OF REPORT

- April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid-Year Report (Non-election Year Only)
- 12-Day Pre-Election Report for the _____ (Type of Election) election on _____ in the State of _____
- 30-Day Post-Election Report following the General Election on _____ in the State of _____
- Termination Report

This report contains activity for Primary Election General Election Special Election Runoff Election

SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
<u>2/1/99</u> through <u>7/31/99</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	0	35885.00
(b) Total Contribution Refunds (from Line 20(d))	0	0
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	0	35885.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	26.56	35,365.77
(b) Total Offsets to Operating Expenditures (from Line 14)	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	26.56	35,365.77
8. Cash on Hand at Close of Reporting Period (from Line 27)	519.23	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

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 Jason Shapiro	Date
Signature of Treasurer <i>Jason Shapiro</i>	10/27/99

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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DETAILED SUMMARY PAGE

of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (in full) <u>Friedheim for Senate</u>		Report Covering the Period: From <u>2/1/99</u> To <u>7/31/99</u>	
I. RECEIPTS		COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:			
(a) Individuals/Persons Other Than Political Committees			
(i) Itemized (use Schedule A)	0		
(ii) Unitemized	0		
(iii) Total of contributions from individuals	0	11,385.00	
(b) Political Party Committees	0	0	
(c) Other Political Committees (such as PACs)	0	0	
(d) The Candidate	0	24,500.00	
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	0	35,885.00	
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0	0	
13. LOANS:			
(a) Made or Guaranteed by the Candidate	0	0	
(b) All Other Loans	0	0	
(c) TOTAL LOANS (add 13(a) and (b))	0	0	
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0	0	
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0	0	
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	0	35,885.00	
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES	26.56	35,365.77	
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0	
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate	0	0	
(b) Of All Other Loans	0	0	
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	0	0	
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees	0	0	
(b) Political Party Committees	0	0	
(c) Other Political Committees (such as PACs)	0	0	
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	0	0	
21. OTHER DISBURSEMENTS			
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	26.56	35,365.77	

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$ 545.79	23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$ 0	24
25. SUBTOTAL (add Line 23 and Line 24)	\$ 545.79	25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	\$ 26.56	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	\$ 519.23	27

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 1
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

Friedheim for Senate

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
City Bank 201 merchant Honolulu: 96813	Bank Service fee Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/28/99	4.41
City Bank 201 merchant st Honolulu: 96813	Bank Service fee Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/31/99	4.41
City Bank 201 merchant st Honolulu: 96813	Bank Service fee Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/30/99	4.44
City Bank 201 merchant st Honolulu: 96813	Bank Service fee Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/31/99	4.42
City Bank 201 merchant st Honolulu: 96813	Bank Service fee Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/30/99	4.45
City Bank 201 merchant st Honolulu: 96813	Bank Service fee Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/31/99	4.43
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

26.56

TOTAL This Period (last page this line number only)

26.56