

## STATE OF HAWAII **CAMPAIGN SPENDING COMMISSION**

8/20/18

235 S. Beretania Street, Room 300 Honolulu, Hawaii 96813 Phone: (808) 586-0285/Fax: (808) 586-0288 www.hawaii.gov/campaign

## STATEMENT OF INFORMATION FOR **ELECTIONEERING COMMUNICATIONS**

Pursuant to Hawaii Revised Statutes ("HRS") §11-341, an electioneering communication means any advertisement that is broadcast from a cable, satellite, television, or radio broadcast station; published in any periodical or newspaper or by electronic means; or sent by mail at a bulk rate, and that: (1) Refers to a clearly identifiable candidate; (2) Is made, or scheduled to be made, either within 30 days prior to a primary or initial special election or within 60 days prior to a general or special election; and (3) Is not susceptible to any reasonable interpretation other than as an appeal to vote for or against a specific candidate.

Persons, which include an individual, a partnership, a candidate committee or noncandidate committee, a party, an association, a corporation, a business entity, an organization, or a labor union and its auxiliary committees, who make electioneering communications in an aggregate amount of more than \$2,000 during any calendar year, are statutorily required to file a Statement of Information within 24 hours of each disclosure date with the Commission. Persons who fail to submit this form timely will be in violation of the campaign finance laws.

\*This form must be filed in addition to the filing of any other report required by candidate and noncandidate committees.

1.	. Name of person making the expenditure: DON S GUZMAN - FRIENDS OF DON S GUZMAN				
2.	2. Name of person sharing or exercising discretion or control over the person making the expenditure:				
3.	B. Custodian of Books and Accounts of person making the expenditure: ANGELITA R DE LA PENA/TREASURER				
the e	expenditure was made by a noncandidate committee, business entity, or an organization, please provide the additional information:				
	Names and titles of executives or board of directors who authorized the expenditure:				
	State of incorporation or formation: N/A				
	Principal address: N/A				
the e	xpenditure was made by an individual, please provide the additional information:				
	Name: DONALD S GUZMAN				
	Address: 46 KAMAIKI CIRCLE, KAHULUI, HI 96732				
	Occupation: MAUI COUNTY COUNCIL MEMBER				
	Employer:				

## **SECTION II - Contributions Received for the Electioneering Communication** (Not applicable to individuals)

Please provide the name and address of each person contributing for the purpose of publishing or broadcasting the electioneering communication:

Name	Address
FRIENDS OF DON S GUZMAN(CANDIDATE COMMITTEE)	PO BOX 3303982, KAHULUI, HI 96733

identified in the electioneering communication as required by HRS §11-393:					
	Name				
	N/A				
2					
3					
Section III - Expenditures Made for the Electioneering Communication  1. Check which election the electioneering communication pertains:					

☐ Opposed

If you are a noncandidate committee making only independent expenditures (Super PAC), then please provide the three (3) top contributors

4. Electioneering communication is made in coordination, cooperation, or concert with or at the request or suggestion of any candidate, candidate committee, noncandidate committee, or its agents: ✓ Yes ☐ No

**✓** Supported

6. Complete the following table (as applicable):

3. Candidate(s) is/are supported or opposed:

	Date the Contract	Date the Advertisement will	
Name of Person to Whom the Expenditure was Made (i.e., Vendor)	for the Expenditure was Executed	be Broadcast, Published, or Mailed	Amount
GILBERT & ASSOCIATES	7/6/18	7/18/18	15,726.98
PACIFIC RADIO GROUP(multi stations)	7/13/18	7/14-8/10/18	3,404.34
PACIFIC RADIO GROUP(multi stations)	7/16/18	7/17-8/10/18	3,000.00
FACEBOOK.COM	7/18/18	7/18-31/18	750.00
THE MAUI NEWS	7/20/18	7/22/18	584.89
THE MAUI NEWS	7/20/18	7/29/18	584.89
THE MAUI NEWS	7/20/18	8/5/18	584.89
WITH ATTACHMENT	WITH ATTACHMENT	WITH ATTACHMENT	VITH ATTACHMEN

ANGELITA R DE LA PENA	9/4/18
Signature of Person Completing Form	Date