

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Tulsi for Hawaii

ADDRESS (number and street)

PO Box 75561

Check if different than previously reported. (ACC)

Kapolei

HI

96707

2. FEC IDENTIFICATION NUMBER ▼

C C00497396

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

HI

02

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

11 / 04 / 2014

in the State of

HI

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

/ /

in the State of

5. Covering Period

10 / 01 / 2014

through

10 / 15 / 2014

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 Talia Tamayo Khurana

Signature of Treasurer Talia Tamayo Khurana

[Electronically Filed]

Date

10 / 21 / 2014

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Tulsi for Hawaii

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	35493.04	1606829.58
(b) Total Contribution Refunds (from Line 20(d))	57.00	4413.65
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	35436.04	1602415.93
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	12173.39	668782.84
(b) Total Offsets to Operating Expenditures (from Line 14).....	238.20	12704.24
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	11935.19	656078.60
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1062282.98	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	4500.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Tulsi for Hawaii

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	19112.25	1007114.89
(ii) Unitemized.....	3880.79	158957.69
(iii) TOTAL of contributions from individuals ▶	22993.04	1166072.58
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	12500.00	440757.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	35493.04	1606829.58
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	3600.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	238.20	12704.24
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	35731.24	1623133.82

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	12173.39	668782.84
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	14500.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	93500.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	93500.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	57.00	4413.65
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	57.00	4413.65
21. OTHER DISBURSEMENTS	2000.00	142650.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	14230.39	923846.49

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1040782.13
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	35731.24
25. SUBTOTAL (add Line 23 and Line 24).....	1076513.37
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	14230.39
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1062282.98

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Tulsi for Hawaii

Full Name (Last, First, Middle Initial) A. Sanjay Anand		Date of Receipt M M / D D / Y Y Y Y 10 / 04 / 2014
Mailing Address 5430 Lyndon B Johnson Fwy		Transaction ID : VN8PCDANMG8
City Dallas	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 216.00
Name of Employer International Technologies Inc.	Occupation CEO	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 216.00	

Full Name (Last, First, Middle Initial) B. Anne Bartley		Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 3580 Clay St		Transaction ID : VN8PCDAN2W5
City San Francisco	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-employed	Occupation Investor	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial) C. ACTBLUE		Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address PO Box 382110		Transaction ID : VN8PCDAN2W5E
City Cambridge	State MA	
FEC ID number of contributing federal political committee. C C00401224		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation Conduit total listed in Agg. field	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 8395.04	[MEMO ITEM] Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	466.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tulsi for Hawaii

A. Full Name (Last, First, Middle Initial)
Anand Bhandari

Mailing Address **2 Cliff Dr**

City **Mineral Wells** State **TX** Zip Code **76067-3301**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self** Occupation **Physician**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 04 / 2014

Transaction ID : VN8PCDANMY9

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Pabba Bhasker

Mailing Address **3100 Riverwood Dr**

City **Fort Worth** State **TX** Zip Code **76116-9565**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SAI Professional Services Inc.** Occupation **Executive**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 04 / 2014

Transaction ID : VN8PCDANMW3

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Subrahmanyam Boyareddigari

Mailing Address **6 Cliff Dr**

City **Mineral Wells** State **TX** Zip Code **76067-3301**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self-employed** Occupation **Physician**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 04 / 2014

Transaction ID : VN8PCDANMP6

Amount of Each Receipt this Period
1015.00

SUBTOTAL of Receipts This Page (optional).....

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

2015.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tulsi for Hawaii

A. Full Name (Last, First, Middle Initial)
Subrahmanyam Boyareddigari

Mailing Address 6 Cliff Dr

City Mineral Wells State TX Zip Code 76067-3301

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-employed Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : VN8PCDAN118

Amount of Each Receipt this Period
485.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8395.04

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : VN8PCDAN118E

Amount of Each Receipt this Period
485.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Randy Castro

Mailing Address 4305 Lakeview Dr SE

City Port Orchard State WA Zip Code 98366

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
281.25

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 12 / 2014

Transaction ID : VN8PCD95A52

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....

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

735.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tulsi for Hawaii

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
8395.04

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		12		2014

Transaction ID : VN8PCD95A52E

Amount of Each Receipt this Period

250.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Randy Castro

Mailing Address **4305 Lakeview Dr SE**

City **Port Orchard** State **WA** Zip Code **98366**

FEC ID number of contributing federal political committee. **C**

Name of Employer _____ Occupation _____
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
281.25

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		15		2014

Transaction ID : VN8PCDAN5T5

Amount of Each Receipt this Period

6.25

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
8395.04

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		15		2014

Transaction ID : VN8PCDAN5T5E

Amount of Each Receipt this Period

6.25

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....

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

6.25

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tulsi for Hawaii

A. Full Name (Last, First, Middle Initial)
Srinath Chakravarty

Mailing Address 6549 Federal Hall St

City State Zip Code
Plano TX 75023-2347

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Wavestrong/IBM IT Project Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 05 / 2014

Transaction ID : VN8PCD860P3

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8395.04

Date of Receipt
M M / D D / Y Y Y Y
10 / 05 / 2014

Transaction ID : VN8PCD860P3E

Amount of Each Receipt this Period
250.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Patrick Donovan

Mailing Address PO Box 1608

City State Zip Code
Keaau HI 96749-1608

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
775.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 12 / 2014

Transaction ID : VN8PCD95A29

Amount of Each Receipt this Period
50.00

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....

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

300.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tulsi for Hawaii

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
8395.04

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		12		2014

Transaction ID : VN8PCD95A29E

Amount of Each Receipt this Period

_____	_____	_____	_____	_____
				50.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Denise F Ellinwood

Mailing Address **46-074 Puulena St
Apt 1126**

City **Kaneohe** State **HI** Zip Code **96744-3751**

FEC ID number of contributing federal political committee. **C _____**

Name of Employer _____ Occupation _____
Self-employed **Homemaker**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
475.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		05		2014

Transaction ID : VN8PCD86090

Amount of Each Receipt this Period

_____	_____	_____	_____	_____
				25.00

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
8395.04

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		05		2014

Transaction ID : VN8PCD86090E

Amount of Each Receipt this Period

_____	_____	_____	_____	_____
				25.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....

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

_____	_____	_____	_____	_____
				25.00
_____	_____	_____	_____	_____

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tulsi for Hawaii

A. Full Name (Last, First, Middle Initial)
Dayaker Gagadam

Mailing Address 11803 South Fwy
Ste 208

City State Zip Code
Burleson TX 76028-7030

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-employed Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 03 / 2014

Transaction ID : VN8PCD94P42

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Hiranya CK Gowda

Mailing Address 2025 Priest Rd

City State Zip Code
Nashville TN 37215-5107

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1660.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 12 / 2014

Transaction ID : VN8PCD95AD6

Amount of Each Receipt this Period
25.00

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8395.04

Date of Receipt
M M / D D / Y Y Y Y
10 / 12 / 2014

Transaction ID : VN8PCD95AD6E

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....

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

525.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tulsi for Hawaii

A. Full Name (Last, First, Middle Initial)
Hiranya CK Gowda

Mailing Address 2025 Priest Rd

City Nashville State TN Zip Code 37215-5107

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1660.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : VN8PCDAN1M9

Amount of Each Receipt this Period
25.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8395.04

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : VN8PCDAN1M9E

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Greenworld Farms LLC

Mailing Address PO Box 3467

City Honolulu State HI Zip Code 96801-3467

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 11 / 2014

Transaction ID : VN8PCD94R13

Amount of Each Receipt this Period
500.00

LLC - Members below if itemized. Permissible funds.

SUBTOTAL of Receipts This Page (optional).....

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

525.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tulsi for Hawaii

A. Full Name (Last, First, Middle Initial)
Howard Green

Mailing Address **PO Box 3467**

City **Honolulu** State **HI** Zip Code **96801-3467**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Green World Coffee** Occupation **Owner**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 11 / 2014

Transaction ID : VN8PCDF1F11

Amount of Each Receipt this Period
500.00

[MEMO ITEM]
*

B. Full Name (Last, First, Middle Initial)
Krishnamurthy Guruvayurappan

Mailing Address **502 Justin Way**

City **Neshanic Station** State **NJ** Zip Code **08853-4270**

FEC ID number of contributing federal political committee. **C**

Name of Employer **American Heart Association** Occupation **Director, Financial Analytics**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1362.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 03 / 2014

Transaction ID : VN8PCD94NC4

Amount of Each Receipt this Period
101.00

C. Full Name (Last, First, Middle Initial)
Ranna Rajni Jani

Mailing Address **4621 Briarhaven Rd**

City **Fort Worth** State **TX** Zip Code **76109-4609**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **501.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 03 / 2014

Transaction ID : VN8PCD94N90

Amount of Each Receipt this Period
501.00

SUBTOTAL of Receipts This Page (optional).....

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

602.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Tulsi for Hawaii

A. Full Name (Last, First, Middle Initial)
Cecil Johnson

Mailing Address 160 Central Caldwood Dr

City State Zip Code
Beaumont TX 77707-1916

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Lamar University Instructor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
234.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : VN8PCDAN8Z1

Amount of Each Receipt this Period
1.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8395.04

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : VN8PCDAN8Z1E

Amount of Each Receipt this Period
1.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Stephen Joseph

Mailing Address 92-7143 Elele St
Apt 1005

City State Zip Code
Kapolei HI 96707-3387

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PVT Land Company Geologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
457.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 05 / 2014

Transaction ID : VN8PCD86083

Amount of Each Receipt this Period
20.00

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....

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

21.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 15 OF 41
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tulsi for Hawaii

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8395.04

Date of Receipt
 M M / D D / Y Y Y Y
10 05 2014

Transaction ID : VN8PCD86083E

Amount of Each Receipt this Period
20.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Vijay G. Kalaria

Mailing Address **6016 Annandale Dr**

City **Fort Worth** State **TX** Zip Code **76132-4448**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Ft. Worth Heart Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
10 03 2014

Transaction ID : VN8PCD94NG6

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Chala Kondrakunta

Mailing Address **8204 Prince Wales Ct**

City **Plano** State **TX** Zip Code **75025-5520**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Global BCS, Inc President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
10 04 2014

Transaction ID : VN8PCDANMJ4

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

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

1000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tulsi for Hawaii

A. Full Name (Last, First, Middle Initial)
Kamla Lalwani

Mailing Address 132 Blue Heron Dr

City Secaucus State NJ Zip Code 07094-2931

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-employed Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 12 / 2014

Transaction ID : VN8PCD95AH7

Amount of Each Receipt this Period
2600.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8395.04

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 12 / 2014

Transaction ID : VN8PCD95AH7E

Amount of Each Receipt this Period
2600.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Parthasarathi Maliseti

Mailing Address 8900 Independence Pkwy
Apt 11106

City Plano State TX Zip Code 75025-5244

FEC ID number of contributing federal political committee. **C**

Name of Employer Mp3 Systems LLC Occupation Management

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
501.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 04 / 2014

Transaction ID : VN8PCDANMN8

Amount of Each Receipt this Period
501.00

SUBTOTAL of Receipts This Page (optional).....

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

3101.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tulsi for Hawaii

Full Name (Last, First, Middle Initial) A. Venkat R Namburu		Date of Receipt M M / D D / Y Y Y Y 10 / 03 / 2014	
Mailing Address 6517 Shoal Creek Rd		Transaction ID : VN8PCD94N74	
City Fort Worth	State TX	Zip Code 76132-4418	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Self-employed	Occupation Physician		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) B. Viran Nana		Date of Receipt M M / D D / Y Y Y Y 10 / 04 / 2014	
Mailing Address 5924 Kittansett Ct		Transaction ID : VN8PCDANMS9	
City Fort Worth	State TX	Zip Code 76132-4491	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 501.00	
Name of Employer Q Hotels	Occupation Owner		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 501.00		

Full Name (Last, First, Middle Initial) C. Elisabeth Olsen		Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2014	
Mailing Address 45-033 Lilipuna Rd		Transaction ID : VN8PCDAN7F2	
City Kaneohe	State HI	Zip Code 96744-3019	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00	
Name of Employer US Army	Occupation ACS Family Support Officer		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 375.00		

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....	1526.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tulsi for Hawaii

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8395.04

Date of Receipt
 M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : VN8PCDAN7F2E

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Rajiv Pandit

Mailing Address **6901 Peters Path**

City **Colleyville** State **TX** Zip Code **76034-6656**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Dallas ENT Surgeon

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2001.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 04 / 2014

Transaction ID : VN8PCDANMB9

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Prashant Patel

Mailing Address **13391 Hemlock Trl**

City **Frisco** State **TX** Zip Code **75035-0036**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Hitachi Consulting Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
501.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 03 / 2014

Transaction ID : VN8PCD94NT5

Amount of Each Receipt this Period
501.00

SUBTOTAL of Receipts This Page (optional).....

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

1501.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tulsi for Hawaii

A. Full Name (Last, First, Middle Initial)
Thomas S. Plum

Mailing Address **PO Box 44610**

City **Kamuela** State **HI** Zip Code **96743-4610**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Plum Hall Inc** Occupation **Programmer**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
375.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 12 / 2014

Transaction ID : VN8PCD95A60

Amount of Each Receipt this Period
25.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8395.04

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 12 / 2014

Transaction ID : VN8PCD95A60E

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Thomas S. Plum

Mailing Address **PO Box 44610**

City **Kamuela** State **HI** Zip Code **96743-4610**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Plum Hall Inc** Occupation **Programmer**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
375.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 15 / 2014

Transaction ID : VN8PCDAN1P4

Amount of Each Receipt this Period
25.00

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....

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

50.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tulsi for Hawaii

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8395.04

Date of Receipt
 M M / D D / Y Y Y Y
10 / 15 / 2014

Transaction ID : VN8PCDAN1P4E

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Srikanth Polavarapu

Mailing Address **1219 Meadow Creek Dr
Apt 1**

City **Irving** State **TX** Zip Code **75038-7267**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Wells Fargo Systems Analyst

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 04 / 2014

Transaction ID : VN8PCDANMQ3

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Gopal Ponangi

Mailing Address **3050 Post Oak Blvd
Ste 699**

City **Houston** State **TX** Zip Code **77056-6512**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Tata Consultancy Services Senior Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1120.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 03 / 2014

Transaction ID : VN8PCD94MA5

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....

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

2000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tulsi for Hawaii

A. Full Name (Last, First, Middle Initial)
Gopal Ponangi

Mailing Address 3050 Post Oak Blvd
Ste 699

City Houston State TX Zip Code 77056-6512

FEC ID number of contributing federal political committee. **C**

Name of Employer Tata Consultancy Services Occupation Senior Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1120.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 05 / 2014

Transaction ID : VN8PCD86100

Amount of Each Receipt this Period
120.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8395.04

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 05 / 2014

Transaction ID : VN8PCD86100E

Amount of Each Receipt this Period
120.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
JP Reddy

Mailing Address 400 SE 3rd Avenue

City Mineral Wells State TX Zip Code 76067-5913

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Self-employed Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 04 / 2014

Transaction ID : VN8PCDANME2

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

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

620.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tulsi for Hawaii

A. Full Name (Last, First, Middle Initial)
Sat P. Gupta D.O. & Associates

Mailing Address 1 Fair Oaks St

City Mineral Wells State TX Zip Code 76067-5053

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 03 / 2014

Transaction ID : VN8PCD94PB7

Amount of Each Receipt this Period
500.00

PARTNERSHIP--partners below if itemized

B. Full Name (Last, First, Middle Initial)
Sat P Gupta

Mailing Address 1 Fair Oaks St

City Mineral Wells State TX Zip Code 76067-5053

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-employed Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 03 / 2014

Transaction ID : VN8PCD94PF8

Amount of Each Receipt this Period
500.00

[MEMO ITEM]
*

C. Full Name (Last, First, Middle Initial)
Kenneth Schultz

Mailing Address 16533 Lewis Cemetery Rd SE

City Silverton State OR Zip Code 97381-9289

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-employed Photographer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 05 / 2014

Transaction ID : VN8PCD860F8

Amount of Each Receipt this Period
1000.00

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....

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

1500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Tulsi for Hawaii

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation **Conduit total listed in Agg. field**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **8395.04**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 05 / 2014

Transaction ID : VN8PCD860F8E

Amount of Each Receipt this Period
 _____ **1000.00** _____

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Anupkumar Shetty

Mailing Address **9041 Jasmine Ln**

City **Irving** State **TX** Zip Code **75063-4278**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Dallas Nephrology Associates** Occupation **Doctor**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 05 / 2014

Transaction ID : VN8PCD86118

Amount of Each Receipt this Period
 _____ **250.00** _____

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation **Conduit total listed in Agg. field**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **8395.04**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 05 / 2014

Transaction ID : VN8PCD86118E

Amount of Each Receipt this Period
 _____ **250.00** _____

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....

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

_____ **250.00** _____

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tulsi for Hawaii

A. Full Name (Last, First, Middle Initial)
Sanjay K Singhania

Mailing Address 305 Cimarron Trl
Ste 140

City Irving State TX Zip Code 75063-4501

FEC ID number of contributing federal political committee. **C**

Name of Employer Tanmai Jewelers Occupation Gemologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
251.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 03 / 2014

Transaction ID : VN8PCD94N33

Amount of Each Receipt this Period
251.00

B. Full Name (Last, First, Middle Initial)
Harold H. Sylvester

Mailing Address 1369 Kahili St

City Kailua State HI Zip Code 96734

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
410.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 05 / 2014

Transaction ID : VN8PCD86075

Amount of Each Receipt this Period
10.00

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8395.04

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 05 / 2014

Transaction ID : VN8PCD86075E

Amount of Each Receipt this Period
10.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....

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

261.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tulsi for Hawaii

A. Full Name (Last, First, Middle Initial)
Prasad Thotakura

Mailing Address 3952 Larkspur Dr

City State Zip Code
Haltom City TX 76137-5818

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Eknazar, Inc President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 03 / 2014

Transaction ID : VN8PCD94MD9

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Laxmi Tummala

Mailing Address 14708 Harmony Ln

City State Zip Code
Frisco TX 75035-0168

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ReMax, DFW Assoc. Realtor & CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
316.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 03 / 2014

Transaction ID : VN8PCD94MY3

Amount of Each Receipt this Period
316.00

C. Full Name (Last, First, Middle Initial)
Murali Vennam

Mailing Address 6348 Southern Hills Dr

City State Zip Code
Fort Worth TX 76132-4485

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AtServ Inc. President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1016.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 04 / 2014

Transaction ID : VN8PCDANMR1

Amount of Each Receipt this Period
1016.00

SUBTOTAL of Receipts This Page (optional).....

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

1582.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 26 OF 41
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tulsi for Hawaii

A. Full Name (Last, First, Middle Initial)
Kalyan Viswanathan

Mailing Address 6823 Windrock Rd

City State Zip Code
Dallas TX 75252-5850

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Dharma Civilization Foundation Executive Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1509.00

Date of Receipt
 / /

Transaction ID : VN8PCDANMK2

Amount of Each Receipt this Period
501.00

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

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

501.00

19112.25

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 41
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tulsi for Hawaii

A. Full Name (Last, First, Middle Initial)
American Hospital Association PAC

Mailing Address 800 10th St NW
Two CityCenter, Ste 400

City Washington State DC Zip Code 20001-5188

FEC ID number of contributing federal political committee. **C C00106146**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 06 / 2014

Transaction ID : VN8PCD8Q7C2

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
CORYPAC INC

Mailing Address 60 Park Pl
Fl 1

City Newark State NJ Zip Code 07102-5511

FEC ID number of contributing federal political committee. **C C00497131**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2014

Transaction ID : VN8PCDAMK44

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
LEAGUE OF CONSERVATION VOTERS ACTION FUND

Mailing Address 1920 L St NW
Ste 800

City Washington State DC Zip Code 20036-5045

FEC ID number of contributing federal political committee. **C C00252940**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 06 / 2014

Transaction ID : VN8PCD8Q7M5

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....

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

4500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 41
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tulsi for Hawaii

A. Full Name (Last, First, Middle Initial)
MACHINISTS NON PARTISAN POLITICAL LEAGUE OF THE INTERNATIONAL ASSOCIATION OF MACHINISTS &

Mailing Address 9000 MACHINISTS PLACE

City State Zip Code
UPPER MARLBORO MD 20772

FEC ID number of contributing federal political committee. **C** C00002469

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 14 / 2014

Transaction ID : VN8PCDAMK02

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
POLITICAL ACTION COMMITTEE OF THE INTERNATIONAL ALLIANCE OF THEATRICAL STAGE EMPLOYES

Mailing Address 1430 Broadway
FI 20

City State Zip Code
New York NY 10018-3348

FEC ID number of contributing federal political committee. **C** C00344325

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 14 / 2014

Transaction ID : VN8PCDAMJT5

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
SOLARCITY CORPORATION POLITICAL ACTION COMMITTEE (SOLARCITY PAC)

Mailing Address 575 7TH ST NW STE 400

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00520569

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2800.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 03 / 2014

Transaction ID : VN8PCD81CA3

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional).....

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

8000.00

12500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 41
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Tulsi for Hawaii

Full Name (Last, First, Middle Initial) Hawaiian Airlines		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 14 / 2014
Mailing Address 3375 Koapaka St # G350		Transaction ID : VN8PCDC8KR9
City Honolulu	State HI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 232.60
Name of Employer	Occupation	Travel Expense Refund
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2459.88	

Full Name (Last, First, Middle Initial) United Airlines		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 07 / 2014
Mailing Address PO Box 66100		Transaction ID : VN8PCD8SMT7
City Chicago	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.60
Name of Employer	Occupation	Refund
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1436.80	

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		
City	State	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	238.20
TOTAL This Period (last page this line number only).....	238.20

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 41			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Tulsi for Hawaii

Full Name (Last, First, Middle Initial) A. ACTBLUE Technical Services			Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2014	
Mailing Address 366 Summer St			Amount of Each Disbursement this Period 143.46	
City Somerville	State MA	Zip Code 02144-3132	Transaction ID : VN7Q49X65B8	
Purpose of Disbursement Credit Card Processing Fees		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. ACTBLUE Technical Services			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2014	
Mailing Address 366 Summer St			Amount of Each Disbursement this Period 121.99	
City Somerville	State MA	Zip Code 02144-3132	Transaction ID : VN7Q49X65C6	
Purpose of Disbursement Credit Card Processing Fees		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. ACTBLUE Technical Services			Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014	
Mailing Address 366 Summer St			Amount of Each Disbursement this Period 64.65	
City Somerville	State MA	Zip Code 02144-3132	Transaction ID : VN7Q49X65D4	
Purpose of Disbursement Credit Card Processing Fees		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	330.10
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 41			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Tulsi for Hawaii

Full Name (Last, First, Middle Initial) A. ADP Human Capital Management		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 711 Kapiolani Blvd		Amount of Each Disbursement this Period 64.99
City Honolulu	State HI Zip Code 96813-5237	
Purpose of Disbursement Payroll fees	Category/Type	Transaction ID : VN7Q49WVW94
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Amazon Web Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address PO Box 81226		Amount of Each Disbursement this Period 37.02
City Seattle	State WA Zip Code 98108-1300	
Purpose of Disbursement Website hosting services	Category/Type	Transaction ID : VN7Q49WGAF5
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Anne Lewis Strategies LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 901 New York Ave NW Suite 470 East		Amount of Each Disbursement this Period 3500.00
City Washington	State DC Zip Code 20001-4432	
Purpose of Disbursement Online Communications Consulting Strategy	Category/Type	Transaction ID : VN7Q49W5YH7
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3602.01
TOTAL This Period (last page this line number only).....	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 41	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tulsi for Hawaii

Full Name (Last, First, Middle Initial) A. Dylan Beesley		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014
Mailing Address 445 Seaside Ave Apt 1805		Amount of Each Disbursement this Period 330.40 Transaction ID : VN7Q49WVWB0
City Honolulu State HI Zip Code 96815-5526	Purpose of Disbursement Health insurance	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Bistro Bis		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address 15 E St NW		Amount of Each Disbursement this Period 1074.42 Transaction ID : VN7Q49X65J3
City Washington State DC Zip Code 20001-1706	Purpose of Disbursement Catering	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. First Data		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address 1307 Walt Whitman Rd		Amount of Each Disbursement this Period 25.00 Transaction ID : VN7Q49X65M9
City Melville State NY Zip Code 11747-3011	Purpose of Disbursement Credit Card Processing Fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1429.82
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 41			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Tulsi for Hawaii

A. First Data

Full Name (Last, First, Middle Initial)
Mailing Address 1307 Walt Whitman Rd

City Melville State NY Zip Code 11747-3011

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 02 / 2014

Amount of Each Disbursement this Period: 32.15

Transaction ID : VN7Q49X65P5

B. First Hawaiian Bank

Full Name (Last, First, Middle Initial)
Mailing Address 590 Farrington Hwy

City Kapolei State HI Zip Code 96707-2009

Purpose of Disbursement
Banking fee

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 01 / 2014

Amount of Each Disbursement this Period: 9.99

Transaction ID : VN7Q49W6GB8

c. Tulsi Gabbard

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1401

City Honolulu State HI Zip Code 96807-1401

Purpose of Disbursement
Reimbursement for hotel accomodations

Candidate Name
Tulsi Gabbard

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: HI District: 02

Date of Disbursement: 10 / 09 / 2014

Amount of Each Disbursement this Period: 181.70

Transaction ID : VN7Q49WGA98

SUBTOTAL of Disbursements This Page (optional) 223.84

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 41			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Tulsi for Hawaii

Full Name (Last, First, Middle Initial) A. Hawaiian Airlines		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 3375 Koapaka St # G350		Amount of Each Disbursement this Period 214.00
City Honolulu	State HI Zip Code 96819-1800	
Purpose of Disbursement Airline ticket	Candidate Name	Transaction ID : VN7Q49WGAC2
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Hawaiian Airlines		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 3375 Koapaka St # G350		Amount of Each Disbursement this Period 60.00
City Honolulu	State HI Zip Code 96819-1800	
Purpose of Disbursement Airline ticket	Candidate Name	Transaction ID : VN7Q49WGAD9
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Hawaiian Airlines		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 3375 Koapaka St # G350		Amount of Each Disbursement this Period 787.50
City Honolulu	State HI Zip Code 96819-1800	
Purpose of Disbursement Airline ticket	Candidate Name	Transaction ID : VN7Q49WGAE7
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	1061.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 41			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Tulsi for Hawaii

Full Name (Last, First, Middle Initial) A. Hawaiian Airlines		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 3375 Koapaka St # G350		Amount of Each Disbursement this Period 74.00
City Honolulu	State HI Zip Code 96819-1800	
Purpose of Disbursement Airline ticket	Category/Type	Transaction ID : VN7Q49WVW52
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. Hawaiian Airlines		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 3375 Koapaka St # G350		Amount of Each Disbursement this Period 124.10
City Honolulu	State HI Zip Code 96819-1800	
Purpose of Disbursement Airline ticket	Category/Type	Transaction ID : VN7Q49WVW60
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) C. Hawaiian Airlines		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 3375 Koapaka St # G350		Amount of Each Disbursement this Period 188.30
City Honolulu	State HI Zip Code 96819-1800	
Purpose of Disbursement Airline ticket	Category/Type	Transaction ID : VN7Q49WVW78
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	386.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 41			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Tulsi for Hawaii

Full Name (Last, First, Middle Initial) A. Hawaiian Airlines		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 3375 Koapaka St # G350		Amount of Each Disbursement this Period 232.60
City Honolulu	State HI Zip Code 96819-1800	
Purpose of Disbursement Airline ticket	Category/Type	Transaction ID : VN7Q49WVW86
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Honu Creative		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address PO Box 2005		Amount of Each Disbursement this Period 1047.50
City Kailua	State HI Zip Code 96734-9005	
Purpose of Disbursement Professional Website Services	Category/Type	Transaction ID : VN7Q49W5YJ5
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Mobi PCS Kapolei		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 480 Kamokila Blvd		Amount of Each Disbursement this Period 34.52
City Kapolei	State HI Zip Code 96707-2049	
Purpose of Disbursement Cell phone service	Category/Type	Transaction ID : VN7Q49WGAG3
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1314.62
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 41			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Tulsi for Hawaii

Full Name (Last, First, Middle Initial) A. Next Level Partners		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 410 1st St SE		Amount of Each Disbursement this Period 392.00
City Washington	State DC	
Zip Code 20003-1819	Purpose of Disbursement Rent for office space	Transaction ID : VN7Q49W5YG0
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Square Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2014
Mailing Address 901 Mission St		Amount of Each Disbursement this Period 216.32
City San Francisco	State CA	
Zip Code 94103-2905	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : VN7Q49WXGF1
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address Barbers Point Finance Station		Amount of Each Disbursement this Period 19.60
City Kapolei	State HI	
Zip Code 96707	Purpose of Disbursement Stamps	Transaction ID : VN7Q49VWVA2
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	627.92
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 41	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Tulsi for Hawaii

Full Name (Last, First, Middle Initial) A. Yost Gold Consulting, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2014
Mailing Address 2741 Brandywine St NW		Amount of Each Disbursement this Period 3000.00
City Washington State DC Zip Code 20008-1041	Purpose of Disbursement Fundraising consulting fee	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : VN7Q49WGAB4
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	11976.21

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 41
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Tulsi for Hawaii

Full Name (Last, First, Middle Initial) A. MARK TAKAI FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2014
Mailing Address PO Box 2267		Amount of Each Disbursement this Period 2000.00
City Pearl City State HI Zip Code 96782-9267	Purpose of Disbursement Contribution	
Candidate Name Mark Takai	Category/Type	Transaction ID : VN7Q49WVWC8
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: HI District: 01		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	2000.00

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Tulsi for Hawaii

Transaction ID : **VN8PC9WKZZ0L**

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Tulsi Gabbard

Primary

General

Other (specify) ▼

Mailing Address
PO Box 1401

City State ZIP Code
Honolulu HI 96807-1401

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
60000.00 58500.00 1500.00

TERMS

Date Incurred Date Due Interest Rate Secured:
08 / 09 / 2012 M M / D D / On Demand N/A % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 1500.00

TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Tulsi for Hawaii** Transaction ID : VN8PC9WKX69L

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Tulsi Gabbard
 Election: 2012
 Primary
 General
 Other (specify) ▼

Mailing Address PO Box 1401
 City Honolulu State HI ZIP Code 96807-1401

Original Amount of Loan 8000.00	Cumulative Payment To Date 5000.00	Balance Outstanding at Close of This Period 3000.00
------------------------------------	---------------------------------------	--

TERMS
 Date Incurred: M 08 / D 10 / Y 2012
 Date Due: M / D / Y On Demand
 Interest Rate: N/A % (apr)
 Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	[] 3000.00
TOTALS This Period (last page in this line only).....	▶	[] 4500.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.