

FEC FORM 1

STATEMENT OF ORGANIZATION

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FEC MAIL CENTER

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1. NAME OF COMMITTEE (in full)  (Check if name is changed) Example: If typing, type over the lines.

Time to Unite, Lead and Serve with Integrity -TULSI PAC

ADDRESS (number and street)

P.O. Box 1174

(Check if address is changed)

Springfield

VA

22151

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address is changed)

tulsipac@gmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

TulsiPAC.com

2. DATE

03 / 21 / 2013

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT  NEW (N) OR  AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Franklin Tsuji

Signature of Treasurer

*Franklin Tsuji*

Date

03 / 21 / 2013

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

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only

For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

FEC FORM 1  
(Revised 02/2009)

13031050808

5. TYPE OF COMMITTEE

**Candidate Committee:**

- (a)  This committee is a principal campaign committee. (Complete the candidate information below.)
- (b)  This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate \_\_\_\_\_

Candidate Party Affiliation  Office Sought:  House  Senate  President State   
 District

- (c)  This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate \_\_\_\_\_

**Party Committee:**

- (d)  This committee is a  (National, State or subordinate) committee of the  (Democratic, Republican, etc.) Party.

**Political Action Committee (PAC):**

- (e)  This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
  - Corporation  Corporation w/o Capital Stock  Labor Organization
  - Membership Organization  Trade Association  Cooperative
  - In addition, this committee is a Lobbyist/Registrant PAC.
- (f)  This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
  - In addition, this committee is a Lobbyist/Registrant PAC.
  - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

**Joint Fundraising Representative:**

- (g)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

**Committees Participating in Joint Fundraiser**

1.	_____	FEC ID number	<input type="checkbox"/> C _____
2.	_____	FEC ID number	<input type="checkbox"/> C _____
3.	_____	FEC ID number	<input type="checkbox"/> C _____
4.	_____	FEC ID number	<input type="checkbox"/> C _____

13031050809

Write or Type Committee Name

# Time to Unite, Lead and Serve with Integrity -TULSI PAC

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

TULSI GABBARD

Mailing Address

PO BOX 75561

KAPOLEI

HI

96707

CITY

STATE

ZIP CODE

Relationship:  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Franklin Tsuji

Mailing Address

P.O. BOX 2655

Honolulu

HI

96803

Title or Position

CITY

STATE

ZIP CODE

Telephone number

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer

Franklin Tsuji

Mailing Address

P.O. BOX 2655

Honolulu

HI

96803

CITY

STATE

ZIP CODE

Title or Position

Telephone number

13031050810

Full Name of Designated Agent

Mailing Address

[Address line]

[Address line]

CITY

STATE

ZIP CODE

Title or Position

Telephone number

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Bank of America

Mailing Address

1501 Pennsylvania Avenue NW

[Address line]

Washington DC 20005

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Empty line]

Mailing Address

[Empty line]

[Empty line]

[Empty line]

CITY

STATE

ZIP CODE

13031050811

Federal Election Commission  
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 3/25/13  
 PREPARER DATE PREPARED

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