

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

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

FOR LINE NUMBER:		PAGE 1 OF 1						
(check only one)								
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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)
Hindu American Political Action Committee

Full Name (Last, First, Middle Initial) A. KANSARA, JAY P.		Date of Receipt MM / DD / YYYY <i>11 / 27 / 2012</i>
Mailing Address <i>940 25th St. NW, Apt. 6-109</i>		Amount of Each Receipt this Period <i>, 120.00</i>
City <i>Washington</i>	State <i>DC</i>	
Zip Code <i>20037</i>		Amount of Each Receipt this Period <i>, 120.00</i>
FEC ID number of contributing federal political committee. <i>C</i>		
Name of Employer <i>HINDU AMERICAN FOUNDATION</i>	Occupation <i>ASSISTANT DIRECTOR</i>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <i>In-kind: PO Box Rental</i>	Aggregate Year-to-Date <i>, 120.00</i>	

Full Name (Last, First, Middle Initial) B. BHUTADA, RISHI K.		Date of Receipt MM / DD / YYYY <i>11 / 29 / 2012</i>
Mailing Address <i>1518 WHITFIELD ST.</i>		Amount of Each Receipt this Period <i>, 2,000.00</i>
City <i>SUGAR LAND</i>	State <i>TX</i>	
Zip Code <i>77479</i>		Amount of Each Receipt this Period <i>, 2,000.00</i>
FEC ID number of contributing federal political committee. <i>C</i>		
Name of Employer <i>STAR PIPE PRODUCTS</i>	Occupation <i>VICE PRESIDENT, FINANCE</i>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <i>In-kind: Legal Fees</i>	Aggregate Year-to-Date <i>, 2,000.00</i>	

Full Name (Last, First, Middle Initial) C.		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State	
Zip Code		Amount of Each Receipt this Period <i>, , .</i>
FEC ID number of contributing federal political committee. <i>C</i>		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date	

SUBTOTAL of Receipts This Page (optional).....▶	<i>, 2,120.00</i>
TOTAL This Period (last page this line number only).....▶	<i>, 2,120.00</i>

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