

FEDERAL
ELECTION
OPERATIONS CENTER

2005 FEB -9 A 9 33

Office Use Only

FEC
FORM 1

STATEMENT OF
ORGANIZATION

1. NAME OF COMMITTEE (to full) (Check if name is changed) Example: if typing, type over the lines 12FE4MS

INDIANA-UIS POLITICAL ACTION COMMITTEE

INDIANAPAC

ADDRESS (number and street) 1210 YASH AGGARWAL

(Check if address is changed) 175 N BRIDGWAY

INDIANAPAC CITY STATE ZIP CODE

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

2. DATE 01 26 2005

3. FEC IDENTIFICATION NUMBER 000280840

4. IS THIS STATEMENT : NEW (N) OR (X) 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 Charis Karmela

Signature of Treasurer [Signature] Date 01 26 2005

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

5. TYPE OF COMMITTEE (Check One)

- (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 _____

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

- (e) This committee is a separate segregated fund.

- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Type of Connected Organization:

- Corporation
- Corporation w/o Capital Stock
- Labor Organization
- Membership Organization
- Trade Association
- Cooperative

FEC Form 1 (Revised 02/2003)

Write or Type Committee Name

India-US Political Action Committee

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

NASHI, ANURAG

Mailing Address

1118 INDEPENDENCE

INDIA

CITY

STATE

ZIP CODE

Title or Position

EXECUTIVE DIRECTOR

Telephone number

212-512-1313

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

STEPHAN KURUMILLA

Mailing Address

163 E CENTRAL AVENUE

PEARL RIVER

CITY

STATE

ZIP CODE

Title or Position

TREASURER

Telephone number

845-735-7222

Full Name of Designated Agent

MEHNAH GUNJI AGGARWAL

Mailing Address

1118 INDEPENDENCE WAY

INDIA

CITY

STATE

ZIP CODE

Title or Position

ASSISTANT TREASURER

Telephone number

845-735-7222

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.

SOINMA FEDERAL SAVINGS

Mailing Address 1810 SOINMA SQUARE STREET

MEXICO CITY (DC) MD 20001-1000

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
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<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
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<i>En</i>	2/9/05
PREPARER	DATE PREPARED