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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)							
	GABBARD, TULSI, , ,		1 16 11			0.0 1111 555	er e Ni i	
	(b) Address (number and street) PO BOX 75255	☐ Check if address changed				Candidate's FEC Identification Number P00009183		
	(c) City, State, and ZIP Code						ew Amended	
	KAPOLEI	HI 96707			7	Statement X (1	N) OR (A)	
4.	Party Affiliation	5. Office Sought			6. State & Dist	rict of Candidate		
	DEMOCRATIC PARTY	Presidential				00		
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE								
7.	. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 (year of election)							
	NOTE: This designation should be filed with the appropriate office listed in the instructions.							
	(a) Name of Committee (in full) TULSI NOW							
	(b) Address (number and street) PO BOX 75255							
	(c) City, State, and ZIP Code							
	KAPOLEI				НІ	96707		
	DE	CIONATION	OF OT	LIED ALI	TUODIZED.	COMMITTEES		
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)								
8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.								
NOTE: This designation should be filed with the principal campaign committee.								
(a) Name of Committee (in full)								
(b) Address (number and street)								
(c) City, State, and ZIP Code								
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.								
Signature of Candidate Date								
G	ABBARD, TULSI, , ,	[Electronically Filed]				01/11/2019		
				[Eleci	ronically Filea _]	01/11/2010		
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.								
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FEC FORM 2 (REV. 02/2009)