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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)									
	Swanson, Elinor, , ,									
	(b) Address (number and street) 1800 43rd St. W.	☐ Check if address changed				Candidate's FEC Identification Number H8MT01257				
	(c) City, State, and ZIP Code					3. Is This		lew	Amended	
	Billings		MT 59106			Staten	nent X (N	N) OR	(A)	
4.	Party Affiliation	5. Office Souç	ght		6. State & Dist		date			
	LIBERTARIAN	House			MT	01				
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE										
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 (year of election)									
	NOTE: This designation should be filed with the appropriate office listed in the instructions.									
	(a) Name of Committee (in full)									
	Swanson For Liberty									
	(b) Address (number and street) 1800 43rd St. W.									
	(c) City, State, and ZIP Code									
					MT	50106	2			
	Billings				MT	59106)			
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										
	vanson, Elinor, , ,		CTI			00/00/00	02/26/2018			
				[Elect	ronically Filed]	02/20/20	10			
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.										

FEC FORM 2 (REV. 02/2009)