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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)								
	Mauro, Eddie, J, ,			10.0					
	(b) Address (number and street) PO Box 21099	☐ Check if address changed			Candidate's FEC Identification Number S0IA00150				
	(c) City, State, and ZIP Code						New	Amended	
	Des Moines		IA	5032	!1	Statement (N) OR	(A)	
4.	Party Affiliation	5. Office Soug				rict of Candidate			
	DEMOCRATIC PARTY	Senate			IA	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)								
Mauro Senate Campaign Team									
(b) Address (number and street)									
	PO Box 21099								
	(c) City, State, and ZIP Code								
	Des Moines				IA	50321			
(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.									
	gnature of Candidate					Date			
M	auro, Eddie, J, ,	[Electronically Filed]				05/15/2019			
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)