FEC FORM 2 STATEMENT OF CANDIDACY

PAGE 1 / 2

1.	(a) Name of Candidate (in full)									
	Hegar, Mary Jennings, MJ, ,									
	(b) Address (number and street) 1916 Mulligan Dr	□ Check if address changed			2. Candidate's FEC Identification Number H8TX31058					
	(c) City, State, and ZIP Code					3. Is Thi	s Nev	v		Amended
	Round Rock		Tک	K 7866	4	Stater	ment (N)	OR	×	(A)
4.	Party Affiliation	5. Office Soug	ht		6. State & Dist	trict of Candi	date			
	DEMOCRATIC PARTY	House			ТХ	31				
	DE	SIGNATIO	N OF PR	INCIPAL	CAMPAIG	и сомм	ITTEE			
7.	. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 (year of election(s).									
	NOTE: This designation should be filed with the appropriate office listed in the instructions.									
	(a) Name of Committee (in full)									
	MJ for Texas									
	(b) Address (number and street) PO BOX 8108									
	(c) City, State, and ZIP Code									
	Round Rock				ТХ	78683	3			
	I hereby authorize the following nan candidacy. NOTE: This designation should be f (a) Name of Committee (in full)									
	DigiDems Committe	e								
	(b) Address (number and street) 8391 Beverly Blvd									
	Ste 638									
	(c) City, State, and ZIP Code									
	Los Angeles				CA	90048	5			
	I certify that I have exa	mined this Stat	ement and to	o the best of	my knowledge a	and belief it is	s true, correct a	nd comple	ete.	
Si	ignature of Candidate					Date				
	legar, Mary Jennings, MJ, ,			[Elec	tronically Filed]	08/20/20)18			
N	OTE: Submission of false, erroneous	or incomplete	information r	nay subject	the person signi	ng this State	ment to penaltie	es of 2 U.S	6.C. §4	37g.
<u> </u>	I I	1		1				FEC	EODM	2 (REV. 02/2009)

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FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized 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)		
Serve America Women's Victory	Fund	
(b) Address (number and street) PO Box 2013		
(c) City, State, and ZIP Code		
Salem	MA	01970
I hereby authorize the following named committee, wh	ich is NOT my principal campaign o	committee, to receive and expend funds on behalf of my
candidacy. NOTE: This designation should be filed wit	,	committee, to receive and expend funds on behalf of my e.
	,	
candidacy. NOTE : This designation should be filed with (a) Name of Committee (in full)	,	

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.

MA

01970

(a) Name of Committee (in full)		
MA House Victory Fund		
(b) Address (number and street) 918 Pennsylvania Ave SE		
(c) City, State, and ZIP Code		
Washington	DC	20003

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)

Salem

(c) City, State, and ZIP Code