Image# 201903189145717179 PAGE 1 / 2

## FEC FORM 2

## STATEMENT OF CANDIDACY

| 1. (a)  | Name of Candidate (in full)  |                |     |  |                 |   |  |      |   |         |  |
|---|--|----------------|-----|--|-----------------|---|--|------|---|---------|--|
| (b)   | Trahan, Lori, , ,  ) Address (number and street) □ Check if address changed  |                |     |  |                 |   | 2. Candidate's FFC Identification Number |      |   |         |  |
| (D)   | Address (number and street)  |                |     |  |                 | Candidate's FEC Identification Number     H8MA03106 |  |      |   |         |  |
| (c)   | City, State, and ZIP Code  |                |     |  |                 | 3. Is This  |  |      | v | Amended |  |
|   | Lowell MA 01853  |                |     |  |                 | Statem  | nent (N                                  | ) OR | × | (A)     |  |
| 4. Pa   | rty Affiliation  | 5. Office Soug | ght |  | 6. State & Dist |   | date                                     |      |   |         |  |
| DI  | EMOCRATIC PARTY  | House          |     |  | MA              | 03  |  |      |   |         |  |
| DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE   |  |                |     |  |                 |   |  |      |   |         |  |
| 7. Ih   | 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)  Lori Trahan for Congress Committee   |  |                |     |  |                 |   |  |      |   |         |  |
| Lon tranamor Congress Committee   |  |                |     |  |                 |   |  |      |   |         |  |
| (b)   | Address (number and street)<br>PO Box 1161   |                |     |  |                 |   |  |      |   |         |  |
| (0)   | City, State, and ZIP Code  |                |     |  |                 |   |  |      |   |         |  |
| (6)   |  |                |     |  | <b>3.4.</b> 0   | 04050   |  |      |   |         |  |
|   | Lowell   |                |     |  | MA              | 01853   | 3  |      |   |         |  |
| 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) Clark Pressley Trahan Victory Fund  |  |                |     |  |                 |   |  |      |   |         |  |
| (b) Address (number and street) PO Box 15   |  |                |     |  |                 |   |  |      |   |         |  |
| (c)   | City, State, and ZIP Code  |                |     |  |                 |   |  |      |   |         |  |
|   | Boston   |                |     |  | MA              | 02137   |  |      |   |         |  |
| 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   |  |                |     |  |                 |   |  |      |   |         |  |
| Trahan, Lori, , , [Electronically Filed] 12/23/2018   |  |                |     |  |                 |   |  |      |   |         |  |
| NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.   |  |                |     |  |                 |   |  |      |   |         |  |
|   |  |                |     |  |                 |   |  |      |   |         |  |
|   |  |                |     |  |                 |   |  |      |   |         |  |
|   | 1  | 1              |     |  | 1               |   | I  | 1    |   |         |  |

FEC FORM 2 (REV. 02/2009)

## : 97 'A = G7 9 @ 5 B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCFHŽG7 < 98 I @ 'CF' ± H9 A = N5 H± CB

Form/Schedule: F2A Transaction ID:

Adding a joint fundraising committee

Form/Schedule: Transaction ID: