Image# 201904129146109179

PAGE 1/2

## FEC FORM 2

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)									
	Morse, Jessica, , ,									
	b) Address (number and street)					Candidate's FEC Identification Number     H8CA04210				
	(c) City, State, and ZIP Code					3. Is This	New		Amended	
	Roseville		Ca	a 9566	1	Statement	(N)	OR	<b>x</b> (A)	
4.	Party Affiliation	5. Office Sou	ght		6. State & Dist	rict of Candidate				
	DEMOCRATIC PARTY	House			CA	04				
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE										
7.	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)									
Jessica Morse for Congress										
(b) Address (number and street) 1079 Sunrise Avenue, Ste. B-275										
	(c) City, State, and ZIP Code									
	Roseville				Ca	95661				
DESIGNATION OF OTHER AUTHORIZED COMMITTEES										
(Including Joint Fundraising Representatives)										
8.	I hereby authorize the following nar candidacy.	ned committee	, which is NO	T my principa	al campaign cor	nmittee, to receive	e and expen	d funds on I	pehalf of my	
	NOTE: This designation should be filed with the principal campaign committee.									
(a) Name of Committee (in full)										
	(4)									
(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 .										
Maura Jamian								•		
Morse, Jessica, , , [Electronically Filed] 04/12/2019										
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)

## : 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DC F HZ G7 < 98 I @ 'C F' + H9 A = N5 H + C B

Form/Schedule: F2A Transaction ID:

Amend to Remove Additional Authorized Committees

Form/Schedule: Transaction ID: