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Page 1 / 1
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| 1. (a) Name of Candidate (in full) Amanda Renteria | | · · · · · · · · · · · · · · · · · · · | • | 201 | 3 00 7 | 17 83 0.20 | |
|--|--|--|---|----------------|----------------------|-----------------|--|
| (b) Address (number and street) P.O. Box 655 | Check if address ch | 2. Candidate's FEC Identification Number | | | | | |
| (c) City, State, and ZIP Code Sanger, CA 93657 | | | 3. Is This Statement | ☑New (N) | OR | Amended L. | |
| 4. Party Affiliation DEMOCRATIC PARTY | 5. Office Sought House | 6. State CA 2 | & District of | Candidate | | | |
| DESIG | SNATION OF PRINCIP | AL CAMPA | IGN CON | MITTE | - | | |
| 7. I hereby designate the following na | amed political committee as my | Principal Campa | ign Committ | ee for the | 201 (vear of elic | election(s). | |
| NOTE: This designation should be fi | led with the appropriate office lis | ted in the instruc | ctions. | | (year or ere | sciony | |
| (a) Name of Committee (in full) | | | | | | | |
| Friends of Renteria | | | | | | | |
| (b) Address (number and street) | | | | | | | |
| P.O. Box 655 | | | | | | | |
| (c) City, State, and ZIP Code | | | | | | | |
| Sanger, CA 93657 | | | | | | | |
| I hereby authorize the following r behalf of my candidacy. NOTE: This designation should be file | | my principal car | ŕ | mittee, to re | ceive and | expend funds on | |
| (a) Name of Committee (in full) | | | | | | | |
| | | | | • | | | |
| (b) Address (number and street) | | | | | | | |
| (c) City, State, and ZIP Code | | | *************************************** | | | | |
| I certify that I have examine | d this Statement and to the best | t of my knowledd | e and belief | it is true. co | orrect and | complete | |
| Signature of Candidate Amanda Renteria | 904 | 8 | Date | 09/27/ | | | |
| Note: Submission of false, erroneque, or in | complate Information may subject the s | erson signing this S | Statement to per | naities of 2 U | S.C 437n. | | |
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(8/2013)