

Image# 201812119142290232

# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Bustos, Cheri, , ,			2. Candidate's FEC Identification Number H2IL17071	
(b) Address (number and street) PO Box 65322		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Washington DC 20035		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)		
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate IL 17		

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 election(s).  
(year of election)

**NOTE:** This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) Friends of Cheri Bustos		
(b) Address (number and street) PO Box 65322		
(c) City, State, and ZIP Code Washington DC 20035		

### 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) 2018 Frontline Women Take Back the House		
(b) Address (number and street) 24 East 93rd St Apt 4B		
(c) City, State, and ZIP Code New York NY 10128		

*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 Bustos, Cheri, , ,  <i>[Electronically Filed]</i>	Date 12/11/2018
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**NOTE:** Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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