Image# 202001289167431244 PAGE 1 / 3

FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)						
	Jones, Gina, Ortiz, ,						
	(b) Address (number and street) PO Box 769261		Check if addre	ess change	d	2. Candidate's FEC Ide H8TX23121	entification Number
	(c) City, State, and ZIP Code					3. Is This	lew Amended
	San Antonio		T	X 782	45	Statement (f	N) OR (A)
4.	Party Affiliation	5. Office Soug	ght		6. State & Dist	rict of Candidate	
	DEMOCRATIC PARTY	House			TX	23	
	DE	SIGNATIC	N OF PR	INCIPAI	CAMPAIGN	N COMMITTEE	
7.	I hereby designate the following nar	med political co	ommittee as n	ny Principa	Campaign Comr	nittee for the $\frac{2020}{\text{(year of ele})}$	election(s).
	NOTE: This designation should be f	iled with the ap	opropriate off	ice listed in	the instructions.		
	(a) Name of Committee (in full)						
	Gina Ortiz Jones for	 Congres 	SS				
	(b) Address (number and street)						
	PO Box 769261						
	(c) City, State, and ZIP Code						
	San Antonio				TX	78245	
8.	(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 f	nea with the pi	пісіраі сапіра	aigir comini			
	(a) Name of Committee (in full) GOJ Victory Fund						
	(b) Address (number and street) 918 Pennsylvania Ave SE						
_	(c) City, State, and ZIP Code						
	Washington				DC	20003	
	I certify that I have exa	mined this Sta	tement and to	o the best o	f my knowledge a	and belief it is true, correc	t and complete.
Si	gnature of Candidate					Date	
Jo	ones, Gina, Ortiz, ,			[Ele	ctronically Filed]	01/28/2020	
N	NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.						
		1	I	1	1		1

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

Paga	2 of	3	
Page	- or	•	

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

	(Including	Joint Fundraising Representa	atives)				
3.	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)						
	Lead the Way						
	(b) Address (number and street) 1887 Whitney Mesa Dr Ste 2980						
	(c) City, State, and ZIP Code			_			
	Henderson	NV	89014				
3.	I hereby authorize the following named committee, which is candidacy. NOTE : This designation should be filed with the (a) Name of Committee (in full)			ıy —			
	Elect More Women						
	(b) Address (number and street) 910 17th St NW Ste 925			_			
	(c) City, State, and ZIP Code			_			
	Washington	DC	20006				
3.	I hereby authorize the following named committee, which is candidacy. NOTE: This designation should be filed with the (a) Name of Committee (in full) NationalServiceUSA		•	iy —			
	(b) Address (number and street) 910 17th St NW Ste 925						
	(c) City, State, and ZIP Code			_			
	Washington	DC	20006				
3.	I hereby authorize the following named committee, which is candidacy. NOTE: This designation should be filed with the (a) Name of Committee (in full) Go for Broke for Veterans (b) Address (number and street)		•	ny			
	PO Box 15320						
	(c) City, State, and ZIP Code			_			
	Washington	DC	20003				

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

Paga	3 of	3
Page	, OI	-

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)						
	Second Service Victory Fund						
	(b) Address (number and street) 2910 E Gary Way						
	(c) City, State, and ZIP Code						
	Phoenix AZ 85042						
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)						
	(c) City, State, and ZIP Code						
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)						
	(c) City, State, and ZIP Code						
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)						
	(c) City, State, and ZIP Code						