Image# 201909189163371460 PAGE 1 / 3

FEC FORM 2

STATEMENT OF CANDIDACY

_	() 11 (((((((((((((((((
1.	(a) Name of Candidate (in full)						
	Haaland, Debra, , ,		ale if a alcier '	h a m a:!		O Condidate a FEC Identification Number	
	(b) Address (number and street) PO Box 25443	□ Che	ck if address cl	nanged		Candidate's FEC Identification Number H8NM01331	
	(c) City, State, and ZIP Code					3. Is This New Amende	ed
	Albuquerque		NM	87125	5	Statement (N) OR (A)	
4.	Party Affiliation	5. Office Sought			6. State & Dist	rict of Candidate	
	DEMOCRATIC PARTY	House			NM	01	
	DE	SIGNATION	OF PRINC	IPAL	CAMPAIGN	N COMMITTEE	
7.	I hereby designate the following nar	med political comm	nittee as my Pr	incipal C	ampaign Comn	nittee for the 2020 election(s). (year of election)	
	NOTE: This designation should be f	iled with the appro	priate office lis	sted in th	e instructions.		
	(a) Name of Committee (in full)	10 CH C C C					
	Deb Haaland for Co	ngress					
	(b) Address (number and street) PO Box 25443						
	(c) City, State, and ZIP Code						
	Albuquerque				NM	87125	
	DE	SIGNATION	OF OTHE	R AUT	HORIZED	COMMITTEES	
					Representative		
		•	-				
8.	candidacy.	ned committee, wr	nich is NOT my	, brinciba	ıı campaıgn con	nmittee, to receive and expend funds on behalf of my	,
	NOTE: This designation should be f	iled with the princi	pal campaign	committe	ee.		
	(a) Name of Committee (in full)						
	Haaland Torres Sm	all Victory F	und				
	riddidiid romoo om	an victory i	aria				
	(b) Address (number and street) 918 Pennsylvania Ave SE						
	(c) City, State, and ZIP Code						
	(c) City, State, and ZIP Code Washington				DC	20003	
					DC	20003	
	Washington	mined this Statem	ent and to the	best of n		20003 nd belief it is true, correct and complete.	
Sig	Washington	mined this Statem	ent and to the	best of n			
	Washington I certify that I have exa	mined this Statem	ent and to the		ny knowledge a	nd belief it is true, correct and complete. Date	
	Washington I certify that I have exa	mined this Statem	ent and to the			nd belief it is true, correct and complete.	
	Washington I certify that I have exa	mined this Statem	ent and to the		ny knowledge a	nd belief it is true, correct and complete. Date	
На	Washington I certify that I have exa gnature of Candidate naland, Debra, , ,			[Electi	ny knowledge a	nd belief it is true, correct and complete. Date	
На	Washington I certify that I have exa gnature of Candidate naland, Debra, , ,			[Electi	ny knowledge a	nd belief it is true, correct and complete. Date 09/18/2019	
На	Washington I certify that I have exa gnature of Candidate naland, Debra, , ,			[Electi	ny knowledge a	nd belief it is true, correct and complete. Date 09/18/2019	——————————————————————————————————————

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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	DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)				
3.	I hereby authorize the following named committee, which is NOT my princic candidacy. NOTE : This designation should be filed with the principal camp				
	(a) Name of Committee (in full)				
	44 Fund				
	(b) Address (number and street) PO Box 6586				
	(c) City, State, and ZIP Code				
	Arlington	VA	22206		
3.	I hereby authorize the following named committee, which is NOT my princicandidacy. NOTE: This designation should be filed with the principal camp (a) Name of Committee (in full) Nadler Victory Fund				
	(b) Address (number and street) 200 W 79th St Unit 8N				
	(c) City, State, and ZIP Code New York	NY	10024		
3.	I hereby authorize the following named committee, which is NOT my princic candidacy. NOTE: This designation should be filed with the principal camp (a) Name of Committee (in full)				
	Davids Haaland Victory Fund (b) Address (number and street) 918 Pennsylvania Ave SE				
	(c) City, State, and ZIP Code				
	Washington	DC	20003		
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) Stevens Haaland Fund				
	(b) Address (number and street) 918 Pennsylvania Ave SE				
	(c) City, State, and ZIP Code				
	Washington	DC	20003		

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES(Including Joint Fundraising Representatives)

8.	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)					
	Kansas New Mexico Victory Fund					
	(b) Address (number and street) 918 Pennsylvania Ave SE					
	(c) City, State, and ZIP Code					
	Washington	DC	20003			
8.	. I hereby authorize the following named committee, which is NOT my princicandidacy. NOTE : This designation should be filed with the principal camp					
	(a) Name of Committee (in full)					
	The Big Six					
	(b) Address (number and street) 918 Pennsylvania Ave SE					
	(c) City, State, and ZIP Code					
	Washington	DC	20003			
8.	. I hereby authorize the following named committee, which is NOT my princicandidacy. NOTE: This designation should be filed with the principal camp (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 candidacy. NOTE: This designation should be filed with the principal campa (a) Name of Committee (in full)					
	(b) Address (number and street)					
	(c) City, State, and ZIP Code					