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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Nam	e of Candidate (in fu	ıll)									
East	man, Kara, , ,										
	ess (number and str 3 Davenport Street	eet)	☐ Check if address changed				Candidate's FEC Identification Number H8NE02220				
(c) City,	State, and ZIP Code)					3. Is This	Ne	•W		Amended
Om				NE	6813	2	Statem	nent (N) OR	X	(A)
4. Party Aff			Office Soug	ht		6. State & Dis		date			
DEMO	CRATIC PARTY		House			NE	02				
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE											
7. I hereby	I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 (year of election)										
NOTE: 7	NOTE: This designation should be filed with the appropriate office listed in the instructions.										
(a) Nam	e of Committee (in f	ull)									
Eastman for Congress											
` '	ess (number and str 8 Davenport St	eet)									
(c) City,	State, and ZIP Code)									
On	naha					NE	68132	!			
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) Nam	e of Committee (in f	ull)									
(a) Name of Committee (in full) Eastman/Raybould Victory Fund											
(b) Address (number and street) 16411 Marcy Street											
(c) City	State, and ZIP Code	<i>j</i>									
	aha					NE	68118				
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						
Eastman, Kara, , ,			[Electronically Filed]			09/19/2018					
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)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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Page	− OT	_

DESIGNATION OF OTHER AUTHORIZED COMMITTEES(Including Joint Fundraising Representatives)

8.	candidacy. NOTE : This designation should be filed with the principal campaign committee, to receive and expend funds on behalf of my								
	(a) Name of Committee (in full)								
	DigiDems Committee								
	(b) Address (number and street) 8391 Beverly Blvd								
	(c) City, State, and ZIP Code								
	Los Angeles	CA	90048						
8.	I hereby authorize the following named committee, which is NOT my principal candidacy. NOTE : This designation should be filed with the principal campa		mmittee, to receive and expend funds on behalf of my						
	(a) Name of Committee (in full)								
	House Victory Project								
	(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 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		mmittee, to receive and expend funds on behalf of my						
8.	I hereby authorize the following named committee, which is NOT my principal candidacy. NOTE : This designation should be filed with the principal campa	mmittee, to receive and expend funds on behalf of my							
	(a) Name of Committee (in full)								
	(b) Address (number and street)								
	(c) City, State, and ZIP Code								