

Image# 202009169267216640

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Tipirneni, Hiral, Vyas, ,			2. Candidate's FEC Identification Number H8AZ08083	
(b) Address (number and street) 5113 West Arrowhead Lakes Drive		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Glendale AZ 85308		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate AZ 06		

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) HIRAL FOR CONGRESS		
(b) Address (number and street) P.O. BOX 43256		
(c) City, State, and ZIP Code PHOENIX AZ 85080		

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) HIRAL VICTORY FUND		
(b) Address (number and street) PO BOX 86494		
(c) City, State, and ZIP Code PHOENIX AZ 85080		

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 Tipirneni, Hiral, Vyas, , <i>[Electronically Filed]</i>	Date 09/16/2020
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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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Optional Supplemental Page for Designation
of Additional Authorized Committees

FEC Form 2S (Revised 02/2017)

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)

GIDEON, KULKARNI, TIPIRNENI JOINT FUNDRAISING COMMITTEE

(b) Address (number and street)

PO BOX 898

(c) City, State, and ZIP Code

SUGAR LAND

TX

77487

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)

NADLER VICTORY FUND

(b) Address (number and street)

200 WEST 79TH STREET, #8N

(c) City, State, and ZIP Code

NEW YORK

NY

10024

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)

HOUSE VICTORY PROJECT 2020

(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 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