## FEC FORM 2 STATEMENT OF CANDIDACY

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| 1.  | (a) Name of Candidate (in full)  |                      |              |           |                 |   |                 |           |          |                  |  |
|---|--|----------------------|--------------|-----------|-----------------|---|-----------------|-----------|----------|------------------|--|
|   | Joe Baca   |                      |              |           |                 |   |                 |           |          |                  |  |
|   | <ul> <li>Address (number and street)</li> <li>P.O. Box 2148</li> </ul>   |                      |              |           |                 | 2. Candidate's FEC Identification Number<br>H6CA42099 |                 |           |          |                  |  |
|   | (c) City, State, and ZIP Code  |                      | CA 92377     |           |                 | 3. Is This New Amended                                |                 |           |          |                  |  |
|   | Rialto   | 7                    | Staten       | nent (N   | ) <b>OR</b>     | ×   | (A)             |           |          |                  |  |
| 4.  | Party Affiliation  | 5. Office Sought     |              |           | 6. State & Dist | rict of Candie  | date            |           |          |                  |  |
|   | DEMOCRATIC PARTY   | House                |              |           | CA              | 35  |                 |           |          |                  |  |
|   | DE   | SIGNATION OF         |              | IPAL      | CAMPAIGN        |   | ITTEE           |           |          |                  |  |
| 7.  | I hereby designate the following named political committee as my Principal Campaign Committee for the 2014 (year of election(s). |                      |              |           |                 |   |                 |           |          |                  |  |
|   | NOTE: This designation should be filed with the appropriate office listed in the instructions.                                   |                      |              |           |                 |   |                 |           |          |                  |  |
| (a) Name of Committee (in full)   |  |                      |              |           |                 |   |                 |           |          |                  |  |
| Friends of Joe Baca 2014  |  |                      |              |           |                 |   |                 |           |          |                  |  |
|   | (b) Address (number and street)<br>555 Capitol Mall, Suite 1425  |                      |              |           |                 |   |                 |           |          |                  |  |
|   | (c) City, State, and ZIP Code  |                      |              |           |                 |   |                 |           |          |                  |  |
|   | Sacramento   |                      |              |           | CA              | 95814   | 1               |           |          |                  |  |
| <ul> <li>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.</li> <li>NOTE: This designation should be filed with the principal campaign committee.</li> <li>(a) Name of Committee (in full)</li> </ul> |  |                      |              |           |                 |   |                 |           |          |                  |  |
|   | (b) Address (number and street)  |                      |              |           |                 |   |                 |           |          |                  |  |
|   | (c) City, State, and ZIP Code  |                      |              |           |                 |   |                 |           |          |                  |  |
| _   | l certify that I have exa  | mined this Statement | and to the b | pest of r | ny knowledge a  | nd belief it is                                       | s true, correct | and compl | ete.     |                  |  |
| Signature of Candidate Date   |  |                      |              |           |                 |   |                 |           |          |                  |  |
| Jo  | Joe Baca [Electronically Filed]  |                      |              |           |                 |   | 01/24/2013      |           |          |                  |  |
| NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.   |  |                      |              |           |                 |   |                 |           |          |                  |  |
|   |  |                      |              |           |                 |   |                 |           |          |                  |  |
|   |  |                      |              |           |                 |   |                 |           |          |                  |  |
| L   | I I  | ı                    |              |           | <u> </u>        |   | 1               | ,<br>FE   | C FORM 2 | 2 (REV. 02/2009) |  |