Image# 11930332720 **FEC FORM 2 STATEMENT OF CANDIDACY**

1. (a) Name of Candidate (in full)							
Zoe Lofgren			and the states		To the effect	Para Nicorda	
(b) Address (number and street)	X Check if address changed				2. Identification Number H4CA16049		
c/o Contribution Solutions, LLC (c) City, State and ZIP Code	123 E. San Carlos St., #531				3. Is This	□ Now	Amended
San Jose	C	4	95112		Statemer		OR (A)
4. Party Affiliation	5. Office Sought 6. State & Dis				trict of Candid	date	` ,
DEMOCRATIC PARTY	House			CA 16	<u> </u>		
DE	SIGNATION	I OF PRIN	ICIPAL C	AMPAIGN (COMMITTE	ΕE	
7. I hereby designate the following name	•	•		·	(2012 (year of election	election(s). n)
NOTE:This designation should be	filed with the ap	opropriate off	ice listed in t	he instruction	S.		
(a) Name of Committee (in full)							
Lofgren for Congress							
(b) Address (number and street)							
c/o Contribution Solutions, LLC 123 E. San Carlos St., #531							
(c) City, State and ZIP Code							
San Jose	C	4	95	112			
8. I hereby authorize the following name		ncluding Joir	nt Fundraisin	g Representa	tives)		ado on bobalf of my
candidacy. NOTE:This designation should be					ee, to receive a	апа ехрепа тап	ius on benan of my
	rnied with the pi	пісіраі сапір	aigh comini	iee.			
(a) Name of Committee (in full)							
(b) Address (number and street)							
(c) City, State and ZIP Code							
I certify that I have ex	amined this Stat	ement and to	the best of	my knowledge	e and belief it i	s true, correc	ct, and complete.
Signature of Candidate					Date		
Zoe Lofgren					02/07/2011		
NOTE:Submission of false, erroneon	us or incomplete	information	may subject	the person sig	gning this Stat	tement to pen	alties of 2 U.S.C.§437g.

FEC FORM 2 (REV. 02/2009)