Image# 10931374919

# FEC FORM 2
## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)
Jared Polis

(b) Address (number and street) ☐ Check if address changed
P.O. Box 4659

2. Identification Number
H8CO02137

(c) City, State and ZIP Code
Boulder CO 80306

3. Is This Statement ☒ New (N) **OR** ☐ Amended (A)

4. Party Affiliation
DEMOCRATIC PARTY

5. Office Sought
House

6. State & District of Candidate
CO 02

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2010 (year of election) election(s).

**NOTE:** This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full)
Friends of Jared Polis Committee

(b) Address (number and street)
P.O. Box 4572

(c) City, State and ZIP Code
Boulder CO 80306

### 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)
Jared Polis Victory Fund

(b) Address (number and street)
PO Box 1174

(c) City, State and ZIP Code
Springfield VA 22151

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** |
|---|---|
| Jared Polis | 09/30/2010 |

**NOTE:** Submission of false, erroneous or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C.§437g.

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| | | | | | | | | |

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES [ ADDITIONAL ]

(Including Joint Fundraising Representatives)

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)

North Fund for Equality

(b) Address (number and street)

PO Box 1174

(c) City, State and ZIP Code

Springfield 22151

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES [ ADDITIONAL ]

(Including Joint Fundraising Representatives)

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)

Jared Polis Majority Fund

(b) Address (number and street)

PO Box 1174

(c) City, State and ZIP Code

Springfield 22151

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES [ ADDITIONAL ]

(Including Joint Fundraising Representatives)

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)

Colorado Democratic Congressional Committee

(b) Address (number and street)

PO Box 1174

(c) City, State and ZIP Code

Springfield 22151