Image# 202004109216633920 PAGE 1 / 2

## FEC FORM 2

## STATEMENT OF CANDIDACY

_										
1.	(a) Name of Candidate (in full)									
	Hayes, Jahana, , ,					1				
	(b) Address (number and street) PO Box 1487	☐ Check if address changed			2. Candidate's FEC Identification Number H8CT05245					
	(c) City, State, and ZIP Code					3. Is This	s Nev	N	Amended	
	Waterbury		CT	0672	1	Staten	nent (N)	OR	<b>x</b> (A)	
4.	Party Affiliation	5. Office Sou	ght		6. State & Dist	rict of Candid	date			
	DEMOCRATIC PARTY	House			CT	05				
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE										
7.	. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 (year of election)									
	NOTE: This designation should be	filed with the ap	opropriate offi	ce listed in t	ne instructions.					
	(a) Name of Committee (in full)	laa								
	Friends of Jahana H	ayes								
	(b) Address (number and street) PO Box 1487									
	(c) City, State, and ZIP Code									
	Waterbury				CT	06721	1			
	DE	SIGNATIO	N OF OT	MED VII.	THORIZED	COMMIT	TEEQ			
	DE				g Representativ		IEES			
		,	including Joh	it i dildidisiii	g representativ	63)				
8.	I hereby authorize the following nar candidacy.	ned committee	, which is NO	Γ my princip	al campaign con	nmittee, to re	eceive and expe	end funds	on behalf of my	
	NOTE: This designation should be	filed with the pr	incipal campa	ign committ	ee.					
	(a) Name of Committee (in full)									
	New Wave Women									
	(b) Address (number and street) 430 S CAPITOL ST SE 2ND F	FLOOR								
	(c) City, State, and ZIP Code									
	Washington				DC	20003				
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.										
Sic	Signature of Candidate Date									
Harris Library										
	yes, varana, , ,			[Elec	tronically Filed]	04/10/20	120			
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.										
NC	JIE: Submission of false, erroneous	, or incomplete	information n	nay subject t	ne person signir	ng this Stater	ment to penaltie	es of 2 U.	5.U. §43/g.	

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

## Optional Supplemental Page for Designation of Additional Authorized Committees

Page	<sup>2</sup> of	2

**DESIGNATION OF OTHER AUTHORIZED COMMITTEES**(Including Joint Fundraising Representatives)

8.	candidacy. <b>NOTE</b> : 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)									
	Maintaining a Majority									
	(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. <b>NOTE</b> : 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									
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. <b>NOTE</b> : 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									
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. <b>NOTE</b> : 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									