Image# 14953213936 PAGE 1 / 1

FEC FORM 2

STATEMENT OF CANDIDACY

	e of Candidate (in full)									
	Mike Thompson	,	N 1 '6 '7			100 ":				
	ess (number and street Office Box 10541) ⊔(☐ Check if address changed				Candidate's FEC Identification Number H8CA01109			
(c) City,	State, and ZIP Code					3. Is This			Amended	
Nap			CA	9458	1	Staten	nent X (N) OR	(A)	
4. Party Aff	iliation	5. Office Soug	ght		6. State & Dis		date			
DEMO	CRATIC PARTY	House			CA	05				
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE										
7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 (year of election)										
NOTE: This designation should be filed with the appropriate office listed in the instructions.										
(a) Name of Committee (in full)										
Mike Thompson For Congress										
(b) Address (number and street) 5429 Madison Avenue										
(c) City,	State, and ZIP Code									
Sa	cramento				CA	95841				
		DECICNATIO	N OF OT	UED ALI	TUODIZED.	COMMIT	TEES			
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)										
(b) Address (number and street)										
(b) Address (number and street)										
(a) City	State and ZID Code									
(C) City,	State, and ZIP Code									
	I certify that I have	examined this Sta	tement and to	the best of	my knowledge a	and belief it is	true, correct	and compl	ete.	
Signature of Candidate Date						Date				
Mike Thomp	oson		[Electronically Filed]				12/12/2014			
NOTE: Sub	mission of false, errone	eous, or incomplete	information n	nay subject t	he person signi	ng this Stater	ment to penalt	ies of 2 U.S	S.C. §437g.	
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FEC FORM 2 (REV. 02/2009)