

FEC FORM 2

STATEMENT OF CANDIDACY

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1. (a) Name of Candidate (in full) Terra Eva Snover			2. FEC Candidate Identification Number H8CA10142	
(b) Address (number and street) PO Box 56338		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code San Jose CA 95156		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation Independent	5. Office Sought House	6. State & District of Candidate CA 10th District		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 election(s).
(year of election)

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

(a) Name of Committee (in full) Vote Terra Snover	
(b) Address (number and street) PO Box 56338	
(c) City, State, and ZIP Code San Jose CA 95156	


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)
(c) City, State, and ZIP Code

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 6-13-2017
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.

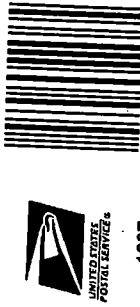
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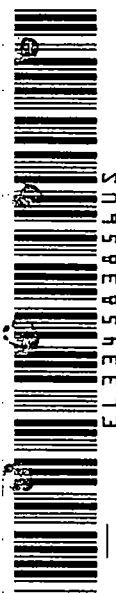
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- Delivery Options**
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- 10:30 AM Delivery Required (additional fee, where available)
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WHEN USED INTERNATIONALLY,
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EP13F July 2013 OD: 12.5 x 9.5



LABEL TT-8, SEPTEMBER 2015 PSN 7690-02-000-9996

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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
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PREPARER
(3/2015)

MP

6/15/2017
DATE PREPARED

20170615 09:00:00