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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a)	Name of Candidate (in full)									
/I- \	Hall, Mel, , ,		l. 16 l . l			0.0	-!- FEO I-I-	ete et	NI la	
(D)	Address (number and street) PO Box 862	□Cne	eck if address	cnanged		2. Candidate H8IN02		ntification	Numbe	
(c)	City, State, and ZIP Code					3. Is This		ew		Amended
	South Bend		IN	46624	1	Stateme	ent 🗶 (N	I) OR		(A)
4. Pa	rty Affiliation	5. Office Sought			6. State & Dist	rict of Candida	ate			
D	EMOCRATIC PARTY	House			IN	02				
	DE	SIGNATION	OF PRIN	ICIPAL	CAMPAIGN	и сомміт	TEE			
7. Ih	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 (year of election)									
NC	OTE: This designation should be	iled with the appr	opriate office	listed in th	e instructions.					
(a)	Name of Committee (in full)									
	Mel Hall for Congre	SS								
(h)	Address (number and street)									
(D)	PO Box 862									
(c)	City, State, and ZIP Code									
	South Bend				IN	46624				
	DE	CICNIATION	OF OTH							
				FR AII	THORIZED.	COMMIT				
				_	THORIZED Representativ		EE9			
0 11		(Inc	cluding Joint I	Fundraisin	g Representativ	es)		1.6		
	ereby authorize the following nar	(Inc	cluding Joint I	Fundraisin	g Representativ	es)		pend func	ls on be	half of my
		(Inc	cluding Joint I	Fundraisin	g Representativ	es)		pend func	ls on be	half of my
ca	ereby authorize the following nar	(Inc	cluding Joint l	Fundraising	g Representativ	es)		pend func	ls on be	half of my
ca NC	ereby authorize the following nan	(Inc	cluding Joint l	Fundraising	g Representativ	es)		pend fund	ls on be	half of my
ca NC	ereby authorize the following nar ndidacy. DTE: This designation should be f	(Inc	cluding Joint l	Fundraising	g Representativ	es)		pend func	ls on be	half of my
Ca NC (a)	ereby authorize the following nar ndidacy. OTE: This designation should be for the following narrows: Name of Committee (in full)	(Inc	cluding Joint l	Fundraising	g Representativ	es)		pend func	s on be	half of my
Ca NC (a)	ereby authorize the following nar ndidacy. DTE: This designation should be f	(Inc	cluding Joint l	Fundraising	g Representativ	es)		pend func	ls on be	half of my
Ca NC (a)	ereby authorize the following nar ndidacy. OTE: This designation should be for the following narrows: Name of Committee (in full)	(Inc	cluding Joint l	Fundraising	g Representativ	es)		pend fund	s on be	half of my
(a)	ereby authorize the following nar ndidacy. OTE: This designation should be for the following narrows: Name of Committee (in full)	(Inc	cluding Joint l	Fundraising	g Representativ	es)		pend func	ls on be	half of my
(a)	ereby authorize the following nar ndidacy. OTE: This designation should be for Name of Committee (in full) Address (number and street)	(Inc	cluding Joint l	Fundraising	g Representativ	es)		pend func	ls on be	half of my
(a)	ereby authorize the following nar ndidacy. OTE: This designation should be for Name of Committee (in full) Address (number and street)	(Inc	cluding Joint l	Fundraising	g Representativ	es)		pend fund	s on be	half of my
(a)	ereby authorize the following nar ndidacy. OTE: This designation should be for Name of Committee (in full) Address (number and street)	(Incommendation (Incommendatio	cluding Joint I	Fundraising	g Representativ al campaign con	es)	eive and ex			half of my
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FEC FORM 2 (REV. 02/2009)