FEC FORM 2 STATEMENT OF CANDIDACY

PAGE 1 / 2

(b) Address (number and street) □ Check if address changed 2. Candidate's FEC (Edentification Number HOMI06152 (c) City, State, and ZIP Code MI 49008 Statement [Now Amended (a) Address (purplex and street) 0. Other Statement [Now Amended (a) Pary Affiliation 5. Office Sought [S. State & District of Candidate Mi 06 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) election(s). (o) Address (number and street) 0.0 Address (number and street) (b) Address (number and street) (c) City, State, and ZIP Code (c) City, State, and ZIP Code Mi 49005 49005 DESIGNATION OF OTHER AUTHORIZED COMMITTEES (noluding Joint Fundratising 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, to receive and expend funds on behalf of my candidacy. Address (number and street) PD Box 51165 (c) City, State, and ZIP Code (a) Name of Committee (in full) DC	1. (a) Name of Candidate (in full)					
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Mit 49008 Statement (N) OR X (A) 4. Party Affiliation 6. Office Sought 6. State & District of Candidate 06 DESIGNATION OF PRINCIPAL CAMPAION COMMITTEE DESIGNATION OF PRINCIPAL CAMPAION COMMITTEE OR COMMITTEE 1. Interesty designate the following named political committee as my Principal Campaign Committee for the2020(year of election) NOTE: This designation should be filed with the appropriate office listed in the instructions. (a) Name of Committee (in full) Jon Hoadley for Congress (b) Address (number and street) PO Box 51165 (a) City, State, and ZiP Code Kalamazoo MI 49005 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) Hoadley Victory Fund (b) Address (number and street) 910 PenneyVenia Avenue SE (b) City, State, and ZIP Code Vashingto <td></td> <td>□ Check if add</td> <td>ress changed</td> <td></td> <td></td> <td>ification Number</td>		□ Check if add	ress changed			ification Number
Approximized intermediate intermediate <td< td=""><td>(c) City, State, and ZIP Code</td><td></td><td></td><td></td><td>3. Is This New</td><td></td></td<>	(c) City, State, and ZIP Code				3. Is This New	
DEMOCRATIC PARTY House MI D6 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) (year of election) 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) Jon Hoadley for Congress (b) Address (number and street) (c) City, State, and ZIP Code Kalamazoo MI 49005 DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundralising Representatives) (a) Name of 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) Hoadley Victory Fund (b) Address (number and street) (c) City, State, and ZIP Code Z0003 Vashington 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. Signature of Candidate Motion of Caldease (monecus, or incomplete information may subject the person signing this Statement	Kalamazoo	n	VI 4900	8	Statement (N)	OR X (A)
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(year of election) () () Address (number and street) PO Box 51166 (c) City, State, and ZIP Code Kalamazoo MI 49005 DESIGNATION OF OTHER AUTHORIZED COMMITTEES (notuding 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) Hoadley Victory Fund (b) Address (number and street) 918 Pennsylvania Avenue SE (c) City, State, and ZIP Code Vashington Dc 20003	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE					
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Signature of Candidate Hoadley, Jon, , , Date 10/14/2020 NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.	Washington			DC	20003	
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	Hoadley, Jon, , ,		[Elect	tronically Filed]	10/14/2020	
FEC. FORM 2 (REV. 02/2009)	NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.					
FEC. FORM 2 (REV. 02/2009)						

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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)			
West Michigan Victory Fund			
(b) Address (number and street) PO Box 15293			
(c) City, State, and ZIP Code Washington	DC	20003	
(a charge charg	20	20000	

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)			
Tie Breaker Candidate Fund			
(b) Address (number and street) 600 Pennsylvania Avenue SE #15180			
(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. **NOTE**: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)		
Takano Equality Wave		
(b) Address (number and street) PO Box 15320		
(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. **NOTE**: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)			
Twelfth Amendment Defenders Fund			
(b) Address (number and street) PO Box 5418			
FO B0X 3410			
(c) City, State, and ZIP Code			
Takoma Park	MD	20913	