FEC FORM 2

STATEMENT OF CANDIDACY

							-		
1.	(a) Name of Candidate (in full)								
	Ladjevardian, Sima, Jandaghi,								
	(b) Address (number and street) PO BOX 430573	☐ Check if address changed				Candidate's FEC Identification Number H0TX02106			
	(c) City, State, and ZIP Code					3. Is This New Amended	<u> </u>		
	Houston		TX	7724	3	Statement (N) OR (A)			
4.	Party Affiliation	5. Office Sought			6. State & Distr	ict of Candidate	_		
	DEMOCRATIC PARTY	House			TX	02	_		
	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 f	iled with the appropriat	e office li	sted in th	ne instructions.				
	(a) Name of Committee (in full)								
	Sima for Texas								
	(b) Address (number and street) PO Box 430573								
	(c) City, State, and ZIP Code						_		
	Houston				TX	77243			
8.	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.				. 0	,			
	NOTE: This designation should be f	led with the principal c	ampaign	committe	ee.				
	(a) Name of Committee (in full) SIMA VICTORY FU	ND							
	(b) Address (number and street) PO BOX 430573								
	(c) City, State, and ZIP Code						_		
	HOUSTON				TX	77243			
	I certify that I have exa	mined this Statement a	and to the	best of	my knowledge ar	nd belief it is true, correct and complete.	_		
Si	gnature of Candidate					Date	_		
Lo	adjevardian, Sima, Jandaghi, ,			[Elect	ronically Filed]	10/30/2020			
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.						_			
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FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES

	(Including Joint Fundraising Representatives)							
3.	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)							
	REPRESENTATION MATTERS V							
	(b) Address (number and street) 910 17TH ST NW STE 925							
	(c) City, State, and ZIP Code							
	WASHINGTON DC 20006							
3.	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							
3.	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)							
	(a) Name of Committee (in fail)							
	(b) Address (number and street)							
	(c) City, State, and ZIP Code							
	Liberably outbories the following named committees which is NOT my principal committee to receive and arroad funds on behalf of my							
3.	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							