

Image# 202009239284959118

# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Hale, Christina, , ,			2. Candidate's FEC Identification Number HOIN05219	
(b) Address (number and street) PO Box 40925		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Indianapolis IN 46240		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate IN 05		

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 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) Hoosiers for Hale		
(b) Address (number and street) PO Box 40925		
(c) City, State, and ZIP Code Indianapolis IN 46240		

### 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) Serve America Victory Fund		
(b) Address (number and street) 2910 E Gary Way		
(c) City, State, and ZIP Code Phoenix AZ 85042		

*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 Hale, Christina, , ,  <i>[Electronically Filed]</i>	Date 09/23/2020
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**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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Optional Supplemental Page for Designation  
of Additional Authorized Committees

FEC Form 2S (Revised 02/2017)

**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)

House Victory Project 2020

(b) Address (number and street)

918 Pennsylvania Ave. SE

(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)

Carson-Hale Hoosier Fund

(b) Address (number and street)

PO Box 1863

(c) City, State, and ZIP Code

Indianapolis

IN

46206

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)

Hale Victory Fund

(b) Address (number and street)

910 17th ST NW Ste 925

(c) City, State, and ZIP Code

Washington

DC

20006

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)

Mighty Mujeres Victory Fund

(b) Address (number and street)

910 17th ST NW Ste 925

(c) City, State, and ZIP Code

Washington

DC

20006