STATE OF THE STATE

FEC FORM 2 STATEMENT OF CANDIDACY

FEC FORM 2 (REV. 02/2009)

(a) Name of Candidate (in full)		· · · · · · · · · · · · · · · · · · ·								~ 7	
Gloria Estela La Riva (Preside	nt) / Sunji	Kumar Freema	n (Vice	President)	2021	o aug	13	PH 12	:51	
(b) Address (number and street) 2969 Mission St		Check if address ch	anged			FEC Candi 0005572	date Id	entifica	tion Nur	nber	
(c) City, State, and ZIP Code San Francisco CA 94110	4				3.	Is This Statemen		New (N)	OR	X	Amended (A)
4. Party Affiliation	5. Office Sou			6. State & Dist	rict o	f Candidate					
Peace and Freedom	President	Vice President									
DE	SIGNATIO	ON OF PRINC	IPAL (CAMPAIGI	1 C	OMMITT	TEE				
7. I hereby designate the following nar	med political c	ommittee as my Pri	ncipal C	ampaign Comr	nittee	ior the	020		electio	n(s).	
NOTE: This designation should be	filed with the g	appropriate office list	ted in the	instructions.		(y	ear of e	election)		
(a) Name of Committee (in full)	• ,	, `	·.			-					
Gloria La Riva fo	r Pres	sident 20)20								
(b) Address (number and street) 2969 Mission St	,"	· }				•					
(c) City, State, and ZIP Code											
San Francisco C	A 94	110									
	ز.										
I hereby authorize the following nancandidacy. NOTE: This designation should be to the control of the con	ned committee		ndraising principal	Representativ	es) .			expen	d funds	on bel	nalf of my
	,	;									
(a) Name of Committee (in full)					***					:	
(b) Address (number and street)	•										
	١,	1 .	, .								
(c) City, State, and ZIP Code			_	· ·							
I certify that I have example	mined this Stå	tement and to the b	est of m	y knowledge a	nd b	elief it is tru	ie, corr	ect and	d compl	ete.	
Signature of Candidate					Dat	te					
Gloria Faliva	لسلا	1/ Frema			/	4~905	<i>+5,</i>	20	20		
NOTE: Submission of false, erroneous	or incomplet	e information may s	ubject th	e person signì	ng th	is Stateme	nt to pe	enalties	of 52 U	.s.c. (§30109.
			<u></u>		•						
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FEC Form 2S (Revised 02/2017)

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Optional Supplemental Page for Designation of Additional Authorized Committees

Page	of	

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							
	: 							
8.	I hereby authorize the following named committee candidacy. NOTE: This designation should be file	e, which is NOT my principal campaign committee, to receive and expend funds on behalf of my ed with the principal campaign committee.						
	(a) Name of Committee (in full)							
	(b) Address (number and street)							
	(c) City, State, and ZIP Code							
8.	I hereby authorize the following named committee candidacy. NOTE : This designation should be file (a) Name of Committee (in full)	e, which is NOT my principal campaign committee, to receive and expend funds on behalf of my ed with the principal campaign committee.						
	(b) Address (number and street)							
	(c) City, State, and ZIP Code							
8.	I hereby authorize the following named committee	è, which is NOT my principal campaign committee, to receive and expend funds on behalf of my						
	candidacy. NOTE: This designation should be file	ed with the principal campaign committee.						
	(a) Name of Committee (in full)							
	(b) Address (number and street)							
	(a) City Ctata and 7/D Code	<u>{</u>						
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(3/2015)

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. Date of Receipt Hand Delivered Postmarked Date of Receipt **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS** Priority Mail Postmarked USPS Priority Mail Express 8/5/20 Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery** Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): **PREPARER**