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## **FEC FORM 2**

## STATEMENT OF CANDIDACY

| 1. (a) Nam                      |  |                        |                  |                          |                                    |                       |   |           |                 |  |
|---------------------------------|--|------------------------|------------------|--------------------------|------------------------------------|-----------------------|---|-----------|-----------------|--|
|                                 | ne of Candidate (in full)  |                        |                  |                          |                                    |                       |   |           |                 |  |
|                                 | ristina Gagnier  |                        |                  |                          |                                    | 100 "11               |   |           |                 |  |
|                                 | 12650 Orange Avenue  |                        |                  | Check if address changed |                                    |                       | Candidate's FEC Identification Number     H4CA35049 |           |                 |  |
| (c) City,                       | State, and ZIP Code  |                        |                  |                          |                                    | 3. Is This            | <b>\</b>  |           | Amended         |  |
| Chi                             | ino  |                        | CA               | 91710                    | )                                  | Statem                | ent X (N)   | OR        | (A)             |  |
| 4. Party Af                     |  | 5. Office Sought       |                  |                          | 6. State & Dist                    |                       | ate   |           |                 |  |
| DEMO                            | CRATIC PARTY   | House                  |                  |                          | CA                                 | 35                    |   |           |                 |  |
|                                 | DE   | SIGNATION C            | F PRINC          | IPAL                     | CAMPAIG                            | OMMI.                 | TTEE  |           |                 |  |
| 7. I hereby                     | y designate the following na   | med political commit   | tee as my Pr     | incipal C                | ampaign Comr                       | nittee for the        | 2014<br>(year of elect                              | election) | on(s).          |  |
| NOTE:                           | This designation should be   | filed with the approp  | riate office lis | sted in th               | e instructions.                    |                       |   |           |                 |  |
| , ,                             | ne of Committee (in full)  |                        |                  |                          |                                    |                       |   |           |                 |  |
| G                               | agnier for Congre  | ss 2014                |                  |                          |                                    |                       |   |           |                 |  |
| ` '                             | ress (number and street)<br>650 Orange Avenue                            |                        |                  |                          |                                    |                       |   |           |                 |  |
| (c) City,                       | State, and ZIP Code  |                        |                  |                          |                                    |                       |   |           |                 |  |
| CI                              | hino   |                        |                  |                          | CA                                 | 91710                 |   |           |                 |  |
|                                 |  |                        |                  |                          |                                    |                       |   |           |                 |  |
|                                 | DE   | SIGNATION C            | F OTHER          | R AUT                    | HORIZED                            | COMMIT                | TEES  |           |                 |  |
|                                 |  | (Inclu                 | ding Joint Fur   | ndraising                | Representativ                      | es)                   |   |           |                 |  |
| 8. I hereby candida             | y authorize the following nar<br>acy.                                    | ned committee, whic    | h is NOT my      | principa                 | l campaign cor                     | nmittee, to re        | ceive and exp                                       | end funds | on behalf of my |  |
| NOTE:                           | This designation should be   | iled with the principa | al campaign o    | committe                 | e.                                 |                       |   |           |                 |  |
| (a) Nam                         | ne of Committee (in full)  |                        |                  |                          |                                    |                       |   |           |                 |  |
| . ,                             | , ,  |                        |                  |                          |                                    |                       |   |           |                 |  |
|                                 |  |                        |                  |                          |                                    |                       |   |           |                 |  |
|                                 |  |                        |                  |                          |                                    |                       |   |           |                 |  |
| (b) Addi                        | ress (number and street)   |                        |                  |                          |                                    |                       |   |           |                 |  |
| (b) Addi                        | ress (number and street)   |                        |                  |                          |                                    |                       |   |           |                 |  |
|                                 |  |                        |                  |                          |                                    |                       |   |           |                 |  |
|                                 | State, and ZIP Code  |                        |                  |                          |                                    |                       |   |           |                 |  |
|                                 |  |                        |                  |                          |                                    |                       |   |           |                 |  |
|                                 | State, and ZIP Code  | unined this Stateme    | of and to the    | hest of r                | ny knowledge s                     | and helief it is      | true correct  | and compl | ofo.            |  |
| (c) City,                       | State, and ZIP Code  I certify that I have example 1.                    | nmined this Stateme    | nt and to the    | best of r                | ny knowledge a                     | _                     | true, correct a                                     | and compl | ete.            |  |
| (c) City,                       | State, and ZIP Code  I certify that I have exact of Candidate            | nmined this Stateme    | nt and to the    | best of r                | ny knowledge a                     | and belief it is      | true, correct a                                     | and compl | ete.            |  |
| (c) City,                       | State, and ZIP Code  I certify that I have exact of Candidate            | mined this Stateme     | nt and to the    |                          |                                    | _                     |   | and compl | ete.            |  |
| (c) City,                       | State, and ZIP Code  I certify that I have exact of Candidate            | mined this Stateme     | nt and to the    |                          | ny knowledge a<br>ronically Filed] | Date                  |   | and compl | ete.            |  |
| (c) City, Signature Christina ( | State, and ZIP Code  I certify that I have exact of Candidate            |                        |                  | [Electi                  | onically Filed]                    | <b>Date</b> 03/12/201 | 14  |           |                 |  |
| (c) City, Signature Christina ( | State, and ZIP Code  I certify that I have example of Candidate  Gagnier |                        |                  | [Electi                  | onically Filed]                    | <b>Date</b> 03/12/201 | 14  |           |                 |  |
| (c) City, Signature Christina ( | State, and ZIP Code  I certify that I have example of Candidate  Gagnier |                        |                  | [Electi                  | onically Filed]                    | <b>Date</b> 03/12/201 | 14  |           |                 |  |

FEC FORM 2 (REV. 02/2009)