Image# 202101259413344179 PAGE 1 / 2

FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)										
	Roybal Caballero, Patricia, , ,		eck if addres			0.0 "1		1			
	(b) Address (number and street) PO Box 12556	⊔Ch		Candidate's FEC Identification Number H2NM01193							
	(c) City, State, and ZIP Code					3. Is This	v	New			Amended
	Albuquerque		NM	8719	5	Staten	nent X	(N)	OR		(A)
4.	Party Affiliation	5. Office Sough	t		6. State & Dist		date				
	DEMOCRATIC PARTY	House			NM	01					
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE											
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2021 (year of election)										
	NOTE: This designation should be f	iled with the app	ropriate office	e listed in th	ne instructions.						
	(a) Name of Committee (in full)										
	Patricia for New Me	XICO									
	(b) Address (number and street) PO Box 12556										
	(c) City, State, and ZIP Code										
	Albuquerque				NM	87195	5				
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				^							
	DE			_	THORIZED g Representativ		IEES				
0		(In	cluding Joint	Fundraisin	g Representativ	es)		ovnono	d funde	on hal	acif of my
8.	I hereby authorize the following name candidacy.	(In	cluding Joint	Fundraisin	g Representativ	es)		expend	d funds	s on bel	nalf of my
8.	I hereby authorize the following nam	(In	cluding Joint	Fundraising my principa	g Representativ	es)		expend	d funds	s on bel	nalf of my
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8.	I hereby authorize the following name candidacy. NOTE: This designation should be f	(In	cluding Joint	Fundraising my principa	g Representativ	es)		expend	d funds	s on bel	nalf of my
8.	I hereby authorize the following name candidacy. NOTE: This designation should be formulated (a) Name of Committee (in full)	(In	cluding Joint	Fundraising my principa	g Representativ	es)		expend	d funds	s on bel	nalf of my
8.	I hereby authorize the following name candidacy. NOTE: This designation should be f	(In	cluding Joint	Fundraising my principa	g Representativ	es)		expend	d funds	s on bel	nalf of my
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8.	I hereby authorize the following name candidacy. NOTE: This designation should be formulated (a) Name of Committee (in full) (b) Address (number and street)	(Inned committee, valued with the pringle	cluding Joint which is NOT	Fundraising my principa	g Representativ	es)	eceive and				nalf of my
	I hereby authorize the following name candidacy. NOTE: This designation should be formulated (a) Name of Committee (in full) (b) Address (number and street) (c) City, State, and ZIP Code	(Inned committee, valued with the pringle	cluding Joint which is NOT	Fundraising my principa	g Representativ	es)	eceive and				nalf of my
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FEC FORM 2 (REV. 02/2009)

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Form/Schedule: F2N Transaction ID:

2021 Special Election.

Form/Schedule: Transaction ID: