

Image# 201911299166087198

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Haake, Sabrina, , ,			2. Candidate's FEC Identification Number HOIN01184	
(b) Address (number and street) 8501 Locust Ave		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Gary IN 46403		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)		
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate IN 01		

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) Committee to Elect Sabrina Haake		
(b) Address (number and street) 8501 Locust Ave		
(c) City, State, and ZIP Code Gary IN 46403		

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		

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 Haake, Sabrina, , , <i>[Electronically Filed]</i>	Date 11/29/2019
--	--------------------

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

--	--	--	--	--	--	--	--	--