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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)										
	Zwahlen, Sue, , ,										
	(b) Address (number and street) 400 Capitol Mall Ste 1545					2. Candidate's FEC Identification Number H8CA10183					
	(c) City, State, and ZIP Code					3. Is This		ew		Amended	
	Sacramento	Sacramento CA 95814				Staten	nent 🗶 (N	N) OR		(A)	
4.	Party Affiliation	5. Office Soug	ht		6. State & Dist	trict of Candid	date				
	DEMOCRATIC PARTY	House			CA	10					
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE											
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 (year of election)										
	NOTE: This designation should be filed with the appropriate office listed in the instructions.										
	(a) Name of Committee (in full)										
Sue Zwahlen for Congress											
	(b) Address (number and street) 400 Capitol Mall Ste 1545										
	(c) City, State, and ZIP Code										
	Sacramento				CA	95814	1				
	DE	CICNATIO	N OF OT	LIED ALL	TUODIZED	COMMIT	TEEC				
	DE				THORIZED ng Representativ		IEES				
8.	I hereby authorize the following name candidacy.	ned committee,	which is NO	T my princip	al campaign cor	mmittee, to re	eceive and ex	pend funds	s on beh	alf of my	
	NOTE: This designation should be f	led with the pri	ncipal campa	aign committ	ee.						
(a) Name of Committee (in full)											
	(b) Address (number and street)										
_	(c) City, State, and ZIP Code										
	I certify that I have exa	mined this Stat	ement and to	the best of	my knowledge a	and belief it is	true, correct	t and comp	lete.		
Si	gnature of Candidate					Date					
Zwahlen. Sue					08/24/2017						
				[Elec	tronically Filed]	08/24/20	117				
N	OTE: Submission of false, erroneous,	or incomplete	information n	nay subject	the person signii	ng this Stater	ment to pena	Ities of 2 U.	S.C. §43	7g.	
NO	DTE: Submission of false, erroneous,	or incomplete	information n	nay subject	the person signii	ng this Stater	ment to pena	Ities of 2 U.	S.C. §43	7g.	
NO	DTE: Submission of false, erroneous,	or incomplete	information n	nay subject	the person signi	ng this Stater	ment to pena	Ities of 2 U.	S.C. §43	7g.	

FEC FORM 2 (REV. 02/2009)