

Image# 202001129167157240

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Fabert, Shannon, , ,			2. Candidate's FEC Identification Number HOKY04125	
(b) Address (number and street) PO Box 290		<input checked="" type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Hebron KY 41048		3. Is This Statement	<input type="checkbox"/> New (N)	OR <input checked="" type="checkbox"/> Amended (A)
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate KY 04		

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) SHANNON FABERT FOR THE 4TH		
(b) Address (number and street) 3111 DURANGO COURT		
(c) City, State, and ZIP Code BURLINGTON KY 41005		

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 Fabert, Shannon, Tamara, , <i>[Electronically Filed]</i>	Date 01/12/2020
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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