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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)								
	Pierce, Antoine, , ,								
	(b) Address (number and street) 4700 Millwood Dr. 86028	et)				Candidate's FEC Identification Number S0LA00311			
	(c) City, State, and ZIP Code						lew	Amended	
	Baton Rouge		LA	7087	'9	Statement X (I	N) OR	(A)	
4.	Party Affiliation	5. Office Soug	ght		6. State & Dist	rict of Candidate			
	DEMOCRATIC PARTY	Senate			LA	00			
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE									
7.	I hereby designate the following nar	med political co	Senate LA 00 SIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE ed political committee as my Principal Campaign Committee for the 2020 (year of election) ed with the appropriate office listed in the instructions. CT ANTOINE PIERCE LA 70816 SIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)						
		iled with the ap	propriate offi	ce listed in	he instructions.				
	(a) Name of Committee (in full) CAMPAIGN TO ELE	MPAIGN TO ELECT ANTOINE PIERCE ss (number and street)							
	(b) Address (number and street) P.O. BOX 86028								
	(c) City, State, and ZIP Code								
	BATON ROUGE				LA	70816			
	NOTE: This designation should be f	iled with the pr	incipal campa	aign commit	ee.				
	(a) Name of Committee (in full)								
	(b) Address (number and street)	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE lowing named political committee as my Principal Campaign Committee for the 2020 (year of election) hould be filed with the appropriate office listed in the instructions. In full) TO ELECT ANTOINE PIERCE street) DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives) owing named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my hould be filed with the principal campaign committee. In full) Street)							
	(c) City, State, and ZIP Code								
		mined this Sta	tement and to	o the best of	my knowledge a	and belief it is true, correc	t and comple	te.	
Si	gnature of Candidate				Date				
Pi	erce, Antoine, , ,			[Elec	tronically Filed]	03/03/2020			
NO	DTE: Submission of false, erroneous	, or incomplete	information r	may subject	the person signir	ng this Statement to pena	alties of 2 U.S	.C. §437g.	
		1		1					

FEC FORM 2 (REV. 02/2009)