FEC FORM 2 STATEMENT OF CANDIDACY

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1.	(a) Name of Candidate (in full)											
	Averhart, James, , ,											
	(b) Address (number and street) 430 Saint Louis Street	□ Check if address changed				2. Candidate's FEC Identification Number H0AL01097						
	(c) City, State, and ZIP Code	City, State, and ZIP Code						New			Amended	
	Mobile	AL 36602				Staten	nent X	(N)	OR		(A)	
4.	Party Affiliation	5. Office Sough	nt		6. State & Distr		date					
	DEMOCRATIC PARTY	House			AL	01						
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE												
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 (year of 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) CAMPAIGN TO ELECT JAMES AVERHART												
(b) Address (number and street) 430 SAINT LOUIS STREET												
	(c) City, State, and ZIP Code											
	MOBILE				AL	36602	2					
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 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 Date												
Aı	Averhart, James, , , [Electronically Filed]						06/12/2019					
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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