

Image# 201807129115375270

# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Mallory Caraway, Barbara, , Mrs.,		2. Candidate's FEC Identification Number HOTX30073
(b) Address (number and street) <input type="checkbox"/> Check if address changed P.O. Box 398136		3. Is This Statement <input checked="" type="checkbox"/> New (N) <b>OR</b> <input type="checkbox"/> Amended (A)
(c) City, State, and ZIP Code Dallas TX 75339		
4. Party Affiliation DEMOCRATIC PARTY	5. Office Sought House	6. State & District of Candidate TX 30

### 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) BARBARA MALLORY CARAWAY FOR CONGRESS		
(b) Address (number and street) P.O. BOX 764171		
(c) City, State, and ZIP Code DALLAS TX 75203		

### 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 Mallory Caraway, Barbara, , Mrs.,  <i>[Electronically Filed]</i>	Date 07/12/2018
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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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