

FEC FORM 2
STATEMENT OF CANDIDACY

RECEIVED
 SECRETARY OF THE SENATE
 PUBLIC RECORDS

2018 JAN 11 PM 3:02

1. (a) Name of Candidate (in full) CHELSEA ELIZABETH MANNING			2. FEC Candidate Identification Number
(b) Address (number and street) 5801 NICHOLSON LANE, SUITE 1910		<input type="checkbox"/> Check if address changed	
(c) City, State, and ZIP Code NORTH BETHESDA, MD 20852-5739		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)	
4. Party Affiliation DEMOCRAT	5. Office Sought U.S. SENATE	6. State & District of Candidate MARYLAND	

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 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)
CHELSEA MANNING FOR U.S. SENATE

(b) Address (number and street)
5801 NICHOLSON LANE, SUITE 1910

(c) City, State, and ZIP Code
NORTH BETHESDA, MD 20852-5739

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 	Date JAN 5, 2018
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.

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201801110200001276

Faxed
or
Hand Delivered

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED 1-11-18
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USPS EXPRESS MAIL _____
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OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

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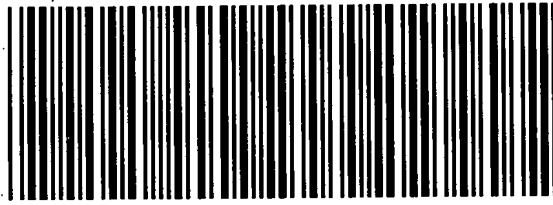
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Date of Receipt

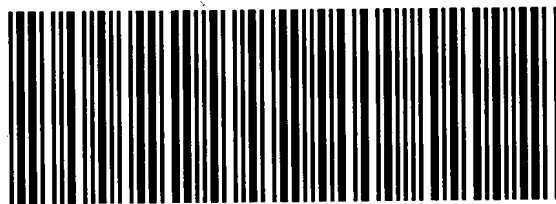
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PREPARER DH DATE PREPARED 1-11-18

201801110200001270



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